## Case 18-33988-MBK Doc 1 Filed 12/05/18 Entered 12/05/18 16:11:50 Desc Main Document Page 1 of 71

Fill in this information to identify your case:		
United States Bankruptcy Court for the:		
DISTRICT OF NEW JERSEY	_	
Case number (if known)	_ Chapter you are filing under:	
	☐ Chapter 7	
	☐ Chapter 11	
	☐ Chapter 12	
	Chapter 13	Check if this an amended filing

#### Official Form 101

### Voluntary Petition for Individuals Filing for Bankruptcy

12/17

The bankruptcy forms use you and Debtor 1 to refer to a debtor filing alone. A married couple may file a bankruptcy case together—called a *joint case*—and in joint cases, these forms use you to ask for information from both debtors. For example, if a form asks, "Do you own a car," the answer would be yes if either debtor owns a car. When information is needed about the spouses separately, the form uses *Debtor 1* and *Debtor 2* to distinguish between them. In joint cases, one of the spouses must report information as *Debtor 1* and the other as *Debtor 2*. The same person must be *Debtor 1* in all of the forms.

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. If more space is needed, attach a separate sheet to this form. On the top of any additional pages, write your name and case number (if known). Answer every question.

Par	t 1: Identify Yourself		
		About Debtor 1:	About Debtor 2 (Spouse Only in a Joint Case):
1.	Your full name		
	Write the name that is on	MaryLu	
	your government-issued picture identification (for example, your driver's	First name	First name
	license or passport).	Middle name	Middle name
	Bring your picture	O'Donnell	
	identification to your meeting with the trustee.	Last name and Suffix (Sr., Jr., II, III)	Last name and Suffix (Sr., Jr., II, III)
2.	All other names you have used in the last 8 years Include your married or maiden names.	Mary Lu O'Donnell Mary L. O'Donnell FKA Marylu Loprest	
3.	Only the last 4 digits of your Social Security number or federal Individual Taxpayer Identification number (ITIN)	xxx-xx-6789	

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Debtor 1 MaryLu O'Donnell

		About Debtor 1:	About Debtor 2 (Spouse Only in a Joint Case):
4.	Any business names and Employer Identification Numbers (EIN) you have used in the last 8 years Include trade names and doing business as names	■ I have not used any business name or EINs.  Business name(s)  EINs	☐ I have not used any business name or EINs.  Business name(s)  EINs
5.	Where you live	18 Dartmouth Road	If Debtor 2 lives at a different address:
		Parlin, NJ 08859  Number, Street, City, State & ZIP Code	Number, Street, City, State & ZIP Code
		Middlesex County	County
		If your mailing address is different from the one above, fill it in here. Note that the court will send any notices to you at this mailing address.	If Debtor 2's mailing address is different from yours, fill it in here. Note that the court will send any notices to this mailing address.
		Number, P.O. Box, Street, City, State & ZIP Code	Number, P.O. Box, Street, City, State & ZIP Code
6.	Why you are choosing this district to file for	Check one:	Check one:
	bankruptcy	Over the last 180 days before filing this petition, I have lived in this district longer than in any other district.	<ul> <li>Over the last 180 days before filing this petition, I have lived in this district longer than in any other district.</li> </ul>
		☐ I have another reason. Explain. (See 28 U.S.C. § 1408.)	☐ I have another reason. Explain. (See 28 U.S.C. § 1408.)

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Debtor 1 MaryLu O'Donnell

Case number (if known)

ar	Tell the Court About	Your B	ankruptcy Ca	ise			
7.	The chapter of the Bankruptcy Code you are				of each, see <i>Notice Required</i> page 1 and check the appropri	by 11 U.S.C. § 342(b) for Individuals Fili riate box.	ng for Bankruptcy
	choosing to file under	□с	hapter 7				
		□с	hapter 11				
		□с	hapter 12				
		<b>■</b> C	hapter 13				
	How you will pay the fee		Lwill pov the	ontiro foo who	n I file my netition. Disease ob	anak with the glady's office in your local o	sourt for more detaile
<b>).</b>	now you will pay the fee	•	about how yo	ou may pay. Typ attorney is subr	ically, if you are paying the fee	neck with the clerk's office in your local c e yourself, you may pay with cash, cashio pehalf, your attorney may pay with a cred	er's check, or money
					allments. If you choose this o	ption, sign and attach the Application for	r Individuals to Pay
			but is not requapplies to you	uired to, waive y ur family size an	our fee, and may do so only if d you are unable to pay the fe	etion only if you are filing for Chapter 7. E your income is less than 150% of the of e in installments). If you choose this opti Official Form 103B) and file it with your pe	fficial poverty line that ion, you must fill out
<b>)</b> .	Have you filed for bankruptcy within the	■ No					
	last 8 years?	☐ Ye			100		
			District		When	Case number	
			District		When When	Case number Case number	
			District		vviieii	Case Humber	
10.	Are any bankruptcy cases pending or being	■ No	)				
	filed by a spouse who is not filing this case with you, or by a business partner, or by an affiliate?	☐ Ye	es.				
			Debtor			Relationship to you	
			District		When	Case number, if known	
			Debtor			Relationship to you	
			District		When	Case number, if known	
11.	Do you rent your	■ No	Go to li	ine 12.			
	residence?	□Ye	es. Has yo	ur landlord obta	ined an eviction judgment aga	inst you?	
				No. Go to line	12.		
				Yes. Fill out <i>Ini</i> this bankruptcy		on Judgment Against You (Form 101A) a	and file it as part of

Page 4 of 71 Case number (if known) Debtor 1 MaryLu O'Donnell

art	Report About Any Bu	sinesses	You Own	as a Sole Proprietor	
12.	Are you a sole proprietor of any full- or part-time business?	■ No.	Go to	°art 4.	
		☐ Yes.	Name	and location of business	
	A sole proprietorship is a business you operate as an individual, and is not a separate legal entity such as a corporation, partnership, or LLC.		Name	of business, if any	
	If you have more than one sole proprietorship, use a separate sheet and attach		Numb	er, Street, City, State & ZIP	Code
	it to this petition.		Check	the appropriate box to desc	cribe your business:
				Health Care Business (as	defined in 11 U.S.C. § 101(27A))
				Single Asset Real Estate (	as defined in 11 U.S.C. § 101(51B))
				Stockbroker (as defined in	11 U.S.C. § 101(53A))
				Commodity Broker (as def	ined in 11 U.S.C. § 101(6))
				None of the above	
13.	Are you filing under Chapter 11 of the Bankruptcy Code and are you a <i>small business</i> debtor?	deadline operation	s. If you in	licate that you are a small b w statement, and federal in	st know whether you are a small business debtor so that it can set appropriate business debtor, you must attach your most recent balance sheet, statement of come tax return or if any of these documents do not exist, follow the procedure
	For a definition of small	■ No.	I am n	ot filing under Chapter 11.	
	business debtor, see 11 U.S.C. § 101(51D).	□ No.	I am fi Code.	ng under Chapter 11, but I	am NOT a small business debtor according to the definition in the Bankruptcy
		☐ Yes.	I am fi	ng under Chapter 11 and I	am a small business debtor according to the definition in the Bankruptcy Code.
Part	4: Report if You Own or	Have Any	Hazardo	ıs Property or Any Prope	rty That Needs Immediate Attention
14.	Do you own or have any	■ No.			
	property that poses or is alleged to pose a threat of imminent and identifiable hazard to	☐ Yes.	What is t	ne hazard?	
	public health or safety? Or do you own any property that needs immediate attention?			ate attention is vhy is it needed?	
			oodou,		
	For example, do you own perishable goods, or livestock that must be fed, or a building that needs urgent repairs?		Where is	the property?	
	O 2 <del>  2 .</del>			Number	, Street, City, State & Zip Code

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Debtor 1 MaryLu O'Donnell

Case number (if known)

Part 5:

Explain Your Efforts to Receive a Briefing About Credit Counseling

 Tell the court whether you have received a briefing about credit counseling.

The law requires that you receive a briefing about credit counseling before you file for bankruptcy. You must truthfully check one of the following choices. If you cannot do so, you are not eligible to file.

If you file anyway, the court can dismiss your case, you will lose whatever filing fee you paid, and your creditors can begin collection activities again.

#### **About Debtor 1:**

You must check one:

I received a briefing from an approved credit counseling agency within the 180 days before I filed this bankruptcy petition, and I received a certificate of completion.

Attach a copy of the certificate and the payment plan, if any, that you developed with the agency.

□ I received a briefing from an approved credit counseling agency within the 180 days before I filed this bankruptcy petition, but I do not have a certificate of completion.

Within 14 days after you file this bankruptcy petition, you MUST file a copy of the certificate and payment plan, if any.

I certify that I asked for credit counseling services from an approved agency, but was unable to obtain those services during the 7 days after I made my request, and exigent circumstances merit a 30-day temporary waiver of the requirement.

To ask for a 30-day temporary waiver of the requirement, attach a separate sheet explaining what efforts you made to obtain the briefing, why you were unable to obtain it before you filed for bankruptcy, and what exigent circumstances required you to file this case.

Your case may be dismissed if the court is dissatisfied with your reasons for not receiving a briefing before you filed for bankruptcy. If the court is satisfied with your reasons, you must still receive a briefing within 30 days after you file. You must file a certificate from the approved agency, along with a copy of the payment plan you developed, if any. If you do not do so, your case may be dismissed.

Any extension of the 30-day deadline is granted only for cause and is limited to a maximum of 15 days.

☐ I am not required to receive a briefing about credit counseling because of:

☐ Incapacity.

I have a mental illness or a mental deficiency that makes me incapable of realizing or making rational decisions about finances.

□ Disability.

My physical disability causes me to be unable to participate in a briefing in person, by phone, or through the internet, even after I reasonably tried to do so.

☐ Active duty.

I am currently on active military duty in a military combat zone.

If you believe you are not required to receive a briefing about credit counseling, you must file a motion for waiver credit counseling with the court.

About Debtor	2	(Spouse	Only	in	а	Joint	Case)
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You must check one:

□ I received a briefing from an approved credit counseling agency within the 180 days before I filed this bankruptcy petition, and I received a certificate of completion.

Attach a copy of the certificate and the payment plan, if any, that you developed with the agency.

☐ I received a briefing from an approved credit counseling agency within the 180 days before I filed this bankruptcy petition, but I do not have a certificate of completion.

Within 14 days after you file this bankruptcy petition, you MUST file a copy of the certificate and payment plan, if any.

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Any extension of the 30-day deadline is granted only for cause and is limited to a maximum of 15 days.

I am not required to receive a briefing about credit
counseling because of:

☐ Incapacity.

I have a mental illness or a mental deficiency that makes me incapable of realizing or making rational decisions about finances.

☐ Disability.

My physical disability causes me to be unable to participate in a briefing in person, by phone, or through the internet, even after I reasonably tried to do so.

☐ Active duty.

I am currently on active military duty in a military combat zone.

If you believe you are not required to receive a briefing about credit counseling, you must file a motion for waiver of credit counseling with the court.

Document Page 6 of 71 Case number (if known) Debtor 1 MaryLu O'Donnell **Answer These Questions for Reporting Purposes** Part 6: 16. What kind of debts do 16a. Are your debts primarily consumer debts? Consumer debts are defined in 11 U.S.C. § 101(8) as "incurred by an individual primarily for a personal, family, or household purpose." you have? ■ No. Go to line 16b. Yes. Go to line 17. 16b. Are your debts primarily business debts? Business debts are debts that you incurred to obtain money for a business or investment or through the operation of the business or investment. ☐ No. Go to line 16c. ☐ Yes. Go to line 17. 16c. State the type of debts you owe that are not consumer debts or business debts 17. Are you filing under I am not filing under Chapter 7. Go to line 18. No. Chapter 7? Do you estimate that I am filing under Chapter 7. Do you estimate that after any exempt property is excluded and administrative expenses ☐ Yes. after any exempt are paid that funds will be available to distribute to unsecured creditors? property is excluded and administrative expenses ☐ No are paid that funds will ☐ Yes be available for distribution to unsecured creditors? 18. How many Creditors do 1-49 **1**,000-5,000 **1** 25,001-50,000 you estimate that you **5001-10,000 5**0,001-100,000 **50-99** owe? **1**0,001-25,000 ☐ More than 100,000 **1**00-199 **1** 200-999 How much do you **\$0 - \$50,000** □ \$1,000,001 - \$10 million □ \$500,000,001 - \$1 billion estimate your assets to □ \$50,001 - \$100,000 □ \$10,000,001 - \$50 million □ \$1,000,000,001 - \$10 billion be worth? □ \$50,000,001 - \$100 million □ \$10,000,000,001 - \$50 billion **\$100,001 - \$500,000** □ \$100,000,001 - \$500 million ☐ More than \$50 billion □ \$500.001 - \$1 million 20. How much do you □ \$0 - \$50,000 □ \$1,000,001 - \$10 million □ \$500,000,001 - \$1 billion estimate your liabilities □ \$50,001 - \$100,000 □ \$10,000,001 - \$50 million □ \$1,000,000,001 - \$10 billion to be? □ \$50,000,001 - \$100 million □ \$10,000,000,001 - \$50 billion **\$100,001 - \$500,000** □ \$100.000.001 - \$500 million ☐ More than \$50 billion □ \$500,001 - \$1 million Sign Below Part 7: For you I have examined this petition, and I declare under penalty of perjury that the information provided is true and correct. If I have chosen to file under Chapter 7, I am aware that I may proceed, if eligible, under Chapter 7, 11,12, or 13 of title 11, United States Code. I understand the relief available under each chapter, and I choose to proceed under Chapter 7. If no attorney represents me and I did not pay or agree to pay someone who is not an attorney to help me fill out this document, I have obtained and read the notice required by 11 U.S.C. § 342(b). I request relief in accordance with the chapter of title 11. United States Code, specified in this petition. I understand making a false statement, concealing property, or obtaining money or property by fraud in connection with a bankruptcy case can result in fines up to \$250,000, or imprisonment for up to 20 years, or both. 18 U.S.C. §§ 152, 1341, 1519, and 3571. /s/ MaryLu O'Donnell Signature of Debtor 2 MaryLu O'Donnell Signature of Debtor 1

Executed on

MM / DD / YYYY

Executed on

11/27/2018

MM / DD / YYYY

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Debtor 1 MaryLu O'Donnell Case number (if known)

For your attorney, if you are represented by one

If you are not represented by an attorney, you do not need to file this page. I, the attorney for the debtor(s) named in this petition, declare that I have informed the debtor(s) about eligibility to proceed under Chapter 7, 11, 12, or 13 of title 11, United States Code, and have explained the relief available under each chapter for which the person is eligible. I also certify that I have delivered to the debtor(s) the notice required by 11 U.S.C. § 342(b) and, in a case in which § 707(b)(4)(D) applies, certify that I have no knowledge after an inquiry that the information in the schedules filed with the petition is incorrect.

/s/ Warren B	Brumel, Esq.	Date	11/27/2018
Signature of A	ttorney for Debtor		MM / DD / YYYY
Warren Brui	mel, Esq. WB3626		
Printed name			
Warren Brui	mel		
Firm name			
65 Main Stre	eet		
PO Box 181			
Keyport, NJ	07735		
Number, Street, Cit	y, State & ZIP Code		
Contact phone	732-264-3400	Email address	wbrumel@keyportlaw.com
WB3626 NJ			
Bar number & State	9		

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Fill in this infor	mation to identify your	case:		
Debtor 1	MaryLu O'Donne	II		
	First Name	Middle Name	Last Name	
Debtor 2				
(Spouse if, filing)	First Name	Middle Name	Last Name	
United States Ba	ankruptcy Court for the:	DISTRICT OF NEW JE	RSEY	
Case number (if known)				Check if this is an amended filing
Official Ec	orm 106Sum			g

#### Official Form 106Sum

#### Summary of Your Assets and Liabilities and Certain Statistical Information

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. Fill out all of your schedules first; then complete the information on this form. If you are filing amended schedules after you file

Par	t 1: Summarize Your Assets		
		Your a	assets of what you own
1.	Schedule A/B: Property (Official Form 106A/B) 1a. Copy line 55, Total real estate, from Schedule A/B	\$	300,000.00
	1b. Copy line 62, Total personal property, from Schedule A/B	\$	11,863.97
	1c. Copy line 63, Total of all property on Schedule A/B	\$	311,863.97
Par	t 2: Summarize Your Liabilities		
			iabilities nt you owe
2.	Schedule D: Creditors Who Have Claims Secured by Property (Official Form 106D)  2a. Copy the total you listed in Column A, Amount of claim, at the bottom of the last page of Part 1 of Schedule D	\$	286,791.20
3.	Schedule E/F: Creditors Who Have Unsecured Claims (Official Form 106E/F)  3a. Copy the total claims from Part 1 (priority unsecured claims) from line 6e of Schedule E/F	\$	0.00
	3b. Copy the total claims from Part 2 (nonpriority unsecured claims) from line 6j of Schedule E/F	\$	85,839.40
	Your total liabilities	\$	372,630.60
Par	t 3: Summarize Your Income and Expenses		
4.	Schedule I: Your Income (Official Form 106I) Copy your combined monthly income from line 12 of Schedule I	\$	5,267.35
5.	Schedule J: Your Expenses (Official Form 106J) Copy your monthly expenses from line 22c of Schedule J	\$	4,991.55
Par	t 4: Answer These Questions for Administrative and Statistical Records		
6.	Are you filing for bankruptcy under Chapters 7, 11, or 13?  No. You have nothing to report on this part of the form. Check this box and submit this form to the court with you	r other sc	hedules.
7.	■ Yes What kind of debt do you have?		
	Your debts are primarily consumer debts. Consumer debts are those "incurred by an individual primarily for a household purpose." 11 U.S.C. § 101(8). Fill out lines 8-9g for statistical purposes. 28 U.S.C. § 159.	ı personal	, family, or

household purpose." 11 U.S.C. § 101(8). Fill out lines 8-9g for statistical purposes. 28 U.S.C. § 159.

Your debts are not primarily consumer debts. You have nothing to report on this part of the form. Check this box and submit this form to the court with your other schedules.

Official Form 106Sum

Summary of Your Assets and Liabilities and Certain Statistical Information

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Debtor 1 MaryLu O'Donnell

From the Statement of Your Current Monthly Income: Copy your total current monthly income from Official Form 122A-1 Line 11; OR, Form 122B Line 11; OR, Form 122C-1 Line 14.

7,754.22

Copy the following special categories of claims from Part 4, line 6 of Schedule E/F:

From Part 4 on Schedule E/F, copy the following:	Total claim	
Troill I alt 4 on Schedule E/F, copy the following.		
9a. Domestic support obligations (Copy line 6a.)	\$	0.00
9b. Taxes and certain other debts you owe the government. (Copy line 6b.)	\$	0.00
9c. Claims for death or personal injury while you were intoxicated. (Copy line 6c.)	\$	0.00
9d. Student loans. (Copy line 6f.)	\$	0.00
9e. Obligations arising out of a separation agreement or divorce that you did not report as priority claims. (Copy line 6g.)	\$	0.00
9f. Debts to pension or profit-sharing plans, and other similar debts. (Copy line 6h.)	+\$	0.00
9g. <b>Total.</b> Add lines 9a through 9f.	\$	0.00

Debtor 1  Debtor 2 (Spouse, if filing)  United States Ban  Case number  Describe E  Do you own or ha  Yes. Where is:  1.1  18 Dartmou Old Bridge	parately list and desas complete and ac space is needed, at on.  ach Residence, Built ve any legal or equiparts.  the property?	Middle Middle  Middle	an asset only once. I le. If two married peopleet to this form. On the	Last Name  Last Name  Last Name  f an asset fits in more than one ole are filling together, both are the top of any additional page:  Dwn or Have an Interest In  g, land, or similar property?	equally responsible for s	supplying correct
Debtor 2 Spouse, if filing)  United States Ban  Case number  Official For  Schedule  Reach category, senink it fits best. Benormation. If more nswer every questive and the second of th	First Name  First Name  kruptcy Court for the Market Properties and despace is needed, attorn.  ach Residence, Built ve any legal or equitable property?	Middle  Middle  DISTRICT (  DI	an asset only once. It le. If two married people to this form. On the Real Estate You Communication in the Real Estate You	Last Name  f an asset fits in more than one one are filing together, both are the top of any additional pages.  Dwn or Have an Interest In	equally responsible for s	amended filing  12/15  In the category where your supplying correct
Debtor 2 Spouse, if filing)  United States Ban Case number  Official For Schedule Leach category, selink it fits best. Be formation. If more nawer every question  One you own or hat No. Go to Part: Yes. Where is  18 Dartmou Old Bridge	First Name  First Name  kruptcy Court for the Market Properties and despace is needed, attorn.  ach Residence, Built ve any legal or equitable property?	Middle  Middle  DISTRICT (  DI	an asset only once. It le. If two married people to this form. On the Real Estate You Communication in the Real Estate You	Last Name  f an asset fits in more than one one are filing together, both are the top of any additional pages.  Dwn or Have an Interest In	equally responsible for s	amended filing  12/15  In the category where your supplying correct
Difficial For Chedule each category, seink it fits best. Be formation. If more nawer every question and one of the control of	m 106A/B A/B: Proparately list and despace is needed, atton.  ach Residence, Builty we any legal or equitable property?	OPERTY Scribe items. List accurate as possible tach a separate sh	an asset only once. I le. If two married peopleet to this form. On the	f an asset fits in more than on ble are filing together, both are the top of any additional page: Own or Have an Interest In	equally responsible for s	amended filing  12/15  In the category where your supplying correct
Difficial For Chedule each category, seink it fits best. Beformation. If more newer every questiant 1: Describe E Do you own or ha No. Go to Part 3 Yes. Where is	m 106A/B  A/B: Proparately list and despace is needed, attorn.  ach Residence, Builty we any legal or equition.	OPERTY scribe items. List a curate as possible tach a separate sh	an asset only once. I le. If two married peol heet to this form. On the	ole are filing together, both are the top of any additional page: Own or Have an Interest In	equally responsible for s	amended filing  12/15  In the category where your supplying correct
Difficial For Chedule each category, seink it fits best. Beformation. If more aswer every question art 1: Describe E Do you own or ha No. Go to Part 3 Yes. Where is 18 Dartmou Old Bridge	m 106A/B  A/B: Proparately list and despace is needed, attorn.  ach Residence, Builty we any legal or equition.	OPERTY scribe items. List a curate as possible tach a separate sh	le. If two married peopheet to this form. On the heet to this form. On the her Real Estate You Co	ole are filing together, both are the top of any additional page: Own or Have an Interest In	equally responsible for s	amended filing  12/15  In the category where your supplying correct
Difficial For Schedule each category, se ink it fits best. Be formation. If more aswer every question art 1: Describe E  Do you own or hat I No. Go to Part I Yes. Where is  18 Dartmou Old Bridge	parately list and desas complete and ac space is needed, at on.  ach Residence, Built ve any legal or equiparts.  the property?	scribe items. List a curate as possible tach a separate sh Iding, Land, or Otl	le. If two married peopheet to this form. On the heet to this form. On the her Real Estate You Co	ole are filing together, both are the top of any additional page: Own or Have an Interest In	equally responsible for s	amended filing  12/15  In the category where your supplying correct
each category, seink it fits best. Be formation. If more iswer every question art 1: Describe E  Do you own or hat  No. Go to Part 2:  Yes. Where is  18 Dartmou Old Bridge	parately list and desas complete and ac space is needed, at on.  ach Residence, Built ve any legal or equiparts.  the property?	scribe items. List a curate as possible tach a separate sh Iding, Land, or Otl	le. If two married peopheet to this form. On the heet to this form. On the her Real Estate You Co	ole are filing together, both are the top of any additional page: Own or Have an Interest In	equally responsible for s	12/15 In the category where you
each category, seink it fits best. Be formation. If more iswer every questivant 1: Describe E  Do you own or hat  No. Go to Part 2:  Yes. Where is  18 Dartmou Old Bridge	parately list and desas complete and ac space is needed, at on.  ach Residence, Built ve any legal or equiparts.  the property?	scribe items. List a curate as possible tach a separate sh Iding, Land, or Otl	le. If two married peopheet to this form. On the heet to this form. On the her Real Estate You Co	ole are filing together, both are the top of any additional page: Own or Have an Interest In	equally responsible for s	n the category where yo
each category, seink it fits best. Be formation. If more iswer every question art 1: Describe E  Do you own or hat  No. Go to Part 2:  Yes. Where is  18 Dartmou Old Bridge	parately list and desas complete and ac space is needed, at on.  ach Residence, Built ve any legal or equiparts.  the property?	scribe items. List a curate as possible tach a separate sh Iding, Land, or Otl	le. If two married peopheet to this form. On the heet to this form. On the her Real Estate You Co	ole are filing together, both are the top of any additional page: Own or Have an Interest In	equally responsible for s	n the category where yo
each category, se nk it fits best. Be ormation. If more swer every questi  art 1: Describe E  Do you own or ha  No. Go to Part : Yes. Where is  1 18 Dartmou Old Bridge	parately list and des as complete and ac space is needed, att on.  ach Residence, Buil we any legal or equi 2.  the property?	scribe items. List a curate as possible tach a separate sh Iding, Land, or Otl	le. If two married peopheet to this form. On the heet to this form. On the her Real Estate You Co	ole are filing together, both are the top of any additional page: Own or Have an Interest In	equally responsible for s	n the category where yo
nk it fits best. Be ormation. If more swer every question. If more swer every question. It is possible to be or and the control of the contro	as complete and ac space is needed, att on.  ach Residence, Buil ve any legal or equi 2.  the property?	curate as possible tach a separate sh Iding, Land, or Otl	le. If two married peopheet to this form. On the heet to this form. On the her Real Estate You Co	ole are filing together, both are the top of any additional page: Own or Have an Interest In	equally responsible for s	supplying correct
No. Go to Part is  Yes. Where is  1 18 Dartmou	2. the property?	itable interest in a	iny residence, buildin	g, land, or similar property?		
Yes. Where is:  1 18 Dartmou	the property?					
Yes. Where is:  1 18 Dartmou	the property?					
1 18 Dartmou Old Bridge						
18 Dartmou Old Bridge						
Old Bridge	ıth Rd			rty? Check all that apply		
Street address, if			Single-family	y nome ulti-unit building		claims or exemptions. Put ed claims on Schedule D:
	available, or other descri	iption	ш .	m or cooperative	Creditors Who Have Cla	ims Secured by Property.
			<u>-</u>	ed or mobile home		
Parlin	NJ	08859-0000	Land	or modile frome	Current value of the entire property?	Current value of the portion you own?
City	State	ZIP Code	☐ Investment	property	\$300,000.00	\$300,000.0
			☐ Timeshare ☐ Other			your ownership interest
				st in the property? Check one	(such as fee simple, te a life estate), if known.	nancy by the entireties,
			■ Debtor 1 on	y	fee simple	
Middlesex			Debtor 2 on	•		
County			_	d Debtor 2 only	Check if this is considered (see instructions)	mmunity property
				of the debtors and another you wish to add about this ite	,	
			property identifica	=		

Do you own, lease, or have legal or equitable interest in any vehicles, whether they are registered or not? Include any vehicles you own that someone else drives. If you lease a vehicle, also report it on Schedule G: Executory Contracts and Unexpired Leases.

Official Form 106A/B Schedule A/B: Property page 1

Part 2: Describe Your Vehicles

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Case number (if known)

3. <b>Ca</b>		trucks, tractors, sport	utility vehicles, motorcycles	·	
	No				
■ ·	Yes				
3.1	Make:	Ford	Who has an interest in the property? Check one		ed claims or exemptions. Put ecured claims on Schedule D:
	Model:	Escape	Debtor 1 only		Claims Secured by Property.
	Year:	2012	Debtor 2 only	Current value of th	e Current value of the
	Approxir	nate mileage:	80k Debtor 1 and Debtor 2 only	entire property?	portion you own?
	Other inf	formation:	☐ At least one of the debtors and another		
			Check if this is community property (see instructions)	\$4,800.0	90 \$4,800.00
3.2	Make:	Hyundai	Who has an interest in the property? Check one		ed claims or exemptions. Put ecured claims on Schedule D:
	Model:	Sonata	■ Debtor 1 only		Claims Secured by Property.
	Year:	2006	☐ Debtor 2 only	Current value of th	e Current value of the
	Approxir	nate mileage:	92k Debtor 1 and Debtor 2 only	entire property?	portion you own?
	Other inf	formation:	At least one of the debtors and another		
			☐ Check if this is community property (see instructions)	\$1,300.0	\$1,300.00
			n you own for all of your entries from Part 2, including a 2. Write that number here		\$6,100.00
Part 3	Descri	be Your Personal and Hou	isehold Items	L	
			itable interest in any of the following items?		Current value of the portion you own? Do not deduct secured claims or exemptions.
E		goods and furnishings Major appliances, furnitur	re, linens, china, kitchenware		
	Yes. De	scribe			
		beds, dr	old Goods and Furnishings including but not limi ressers, nightstands, appliances, couches, lamps pots/pans, dinnerware, flatware, domestics, iron,	, tables,	\$2,500.00
E)	No	Televisions and radios; a	nudio, video, stereo, and digital equipment; computers, print meras, media players, games	ers, scanners; music col	lections; electronic devices
		TV, cloc	ks, cell phone, laptop computer, DVD player		\$500.00

Official Form 106A/B Schedule A/B: Property page 2

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Case number (if known) Document Debtor 1 MaryLu O'Donnell 8. Collectibles of value Examples: Antiques and figurines; paintings, prints, or other artwork; books, pictures, or other art objects; stamp, coin, or baseball card collections; other collections, memorabilia, collectibles ■ No ☐ Yes. Describe..... 9. Equipment for sports and hobbies Examples: Sports, photographic, exercise, and other hobby equipment; bicycles, pool tables, golf clubs, skis; canoes and kayaks; carpentry tools; musical instruments No ☐ Yes. Describe..... 10. Firearms Examples: Pistols, rifles, shotguns, ammunition, and related equipment ■ No ☐ Yes. Describe..... Examples: Everyday clothes, furs, leather coats, designer wear, shoes, accessories □ No Yes. Describe..... \$400.00 ordinary used clothing 12. Jewelry Examples: Everyday jewelry, costume jewelry, engagement rings, wedding rings, heirloom jewelry, watches, gems, gold, silver ■ No ☐ Yes. Describe..... 13. Non-farm animals Examples: Dogs, cats, birds, horses ☐ No Yes. Describe..... 1 worthless cat \$0.00 14. Any other personal and household items you did not already list, including any health aids you did not list ■ No ☐ Yes. Give specific information..... 15. Add the dollar value of all of your entries from Part 3, including any entries for pages you have attached \$3,400.00 for Part 3. Write that number here ..... Part 4: Describe Your Financial Assets Do you own or have any legal or equitable interest in any of the following? Current value of the portion you own? Do not deduct secured claims or exemptions. 16. Cash Examples: Money you have in your wallet, in your home, in a safe deposit box, and on hand when you file your petition No ☐ Yes..... 17. Deposits of money

Examples: Checking, savings, or other financial accounts; certificates of deposit; shares in credit unions, brokerage houses, and other similar institutions. If you have multiple accounts with the same institution, list each.

□ No Institution name: ■ Yes.....

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		17.1.	checking/savings account	Chase Bank Citibank PNC Bank	\$1,018.00
18	_ '			ge firms, money market accounts	
	■ No □ Yes		Institution or issuer nam	e:	
19	. Non-publicly traded stopoint venture  ■ No	ock and	interests in incorporate	d and unincorporated businesses, including	an interest in an LLC, partnership, and
	Yes. Give specific info		about them me of entity:	% of owners	ship:
20	Negotiable instruments	include p ents are	personal checks, cashiers those you cannot transfe	e and non-negotiable instruments checks, promissory notes, and money orders. r to someone by signing or delivering them.	
	·		uer name:		
21	□ No	RA, ERIS	SA, Keogh, 401(k), 403(b	), thrift savings accounts, or other pension or prof	fit-sharing plans
	Yes. List each accoun		ely. of account:	Institution name:	
		retire savin	oyee 401k ement igs/pension	Citibank: Employer plan administrators	5
			unts excluded from or estate		Unknown
22		d deposit	s you have made so that	you may continue service or use from a compan c utilities (electric, gas, water), telecommunication institution name or individual:	
23		or a period	dic payment of money to	you, either for life or for a number of years)	
	■ No □ Yes Iss	suer nam	e and description.		
24	. Interests in an education 26 U.S.C. §§ 530(b)(1), §	on IRA, ir 529A(b),	n an account in a qualif and 529(b)(1).	ied ABLE program, or under a qualified state f	uition program.
		stitution r	name and description. Se	parately file the records of any interests.11 U.S.C	. § 521(c):
25	. Trusts, equitable or fut ■ No □ Yes. Give specific info			than anything listed in line 1), and rights or po	owers exercisable for your benefit
26	Patents, copyrights, tra	ademark	s, trade secrets, and ot		
	■ No ■ Yes. Give specific info			om royalties and licensing agreements	
27	Licenses, franchises, a  Examples: Building peri  No  Yes. Give specific info	mits, excl	lusive licenses, cooperat	ve association holdings, liquor licenses, profession	onal licenses

Official Form 106A/B Schedule A/B: Property page 4

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Case number (if known) Document Debtor 1 MaryLu O'Donnell \$0.00 NJ drivers license Money or property owed to you? Current value of the portion you own? Do not deduct secured claims or exemptions. 28. Tax refunds owed to you ■ No ☐ Yes. Give specific information about them, including whether you already filed the returns and the tax years...... 29. Family support Examples: Past due or lump sum alimony, spousal support, child support, maintenance, divorce settlement, property settlement Yes. Give specific information..... DSO benefits due debtor Unknown child support 30. Other amounts someone owes you Examples: Unpaid wages, disability insurance payments, disability benefits, sick pay, vacation pay, workers' compensation, Social Security benefits; unpaid loans you made to someone else ■ No ☐ Yes. Give specific information.. 31. Interests in insurance policies Examples: Health, disability, or life insurance; health savings account (HSA); credit, homeowner's, or renter's insurance Yes. Name the insurance company of each policy and list its value. Company name: Beneficiary: Surrender or refund value: **Allstate Assurance Co** \$1,345.97 daughter 32. Any interest in property that is due you from someone who has died If you are the beneficiary of a living trust, expect proceeds from a life insurance policy, or are currently entitled to receive property because someone has died. No ☐ Yes. Give specific information.. 33. Claims against third parties, whether or not you have filed a lawsuit or made a demand for payment Examples: Accidents, employment disputes, insurance claims, or rights to sue ☐ Yes. Describe each claim....... 34. Other contingent and unliquidated claims of every nature, including counterclaims of the debtor and rights to set off claims ☐ Yes. Describe each claim....... 35. Any financial assets you did not already list No

36. Add the dollar value of all of your entries from Part 4, including any entries for pages you have attached for Part 4. Write that number here.....

\$2.363.97

Part 5: Describe Any Business-Related Property You Own or Have an Interest In. List any real estate in Part 1.

☐ Yes. Give specific information...

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Case number (if known) Document Debtor 1 MaryLu O'Donnell 37. Do you own or have any legal or equitable interest in any business-related property? No. Go to Part 6. ☐ Yes. Go to line 38. Describe Any Farm- and Commercial Fishing-Related Property You Own or Have an Interest In. If you own or have an interest in farmland, list it in Part 1. 46. Do you own or have any legal or equitable interest in any farm- or commercial fishing-related property? No. Go to Part 7. ☐ Yes. Go to line 47. Describe All Property You Own or Have an Interest in That You Did Not List Above 53. Do you have other property of any kind you did not already list? Examples: Season tickets, country club membership ☐ Yes. Give specific information....... 54. Add the dollar value of all of your entries from Part 7. Write that number here ...... \$0.00 List the Totals of Each Part of this Form 55. Part 1: Total real estate, line 2 ..... \$300,000.00 Part 2: Total vehicles, line 5 \$6,100.00 Part 3: Total personal and household items, line 15 57. \$3,400.00 58. Part 4: Total financial assets, line 36 \$2,363.97 59. Part 5: Total business-related property, line 45 \$0.00 Part 6: Total farm- and fishing-related property, line 52 \$0.00 Part 7: Total other property not listed, line 54 \$0.00

\$11,863.97

Copy personal property total

Official Form 106A/B Schedule A/B: Property

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Total personal property. Add lines 56 through 61...

63. Total of all property on Schedule A/B. Add line 55 + line 62

page 6

\$11,863.97

\$311,863.97

Fill in this infor	mation to identify your	case:		
Debtor 1	MaryLu O'Donne	II		
	First Name	Middle Name	Last Name	
Debtor 2				
(Spouse if, filing)	First Name	Middle Name	Last Name	
United States Bankruptcy Court for the:		DISTRICT OF NEW JERSEY		
Case number				
(if known)				Check if this is an amended filing

#### Official Form 106C

### Schedule C: The Property You Claim as Exempt

4/16

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. Using the property you listed on *Schedule A/B: Property* (Official Form 106A/B) as your source, list the property that you claim as exempt. If more space is needed, fill out and attach to this page as many copies of *Part 2: Additional Page* as necessary. On the top of any additional pages, write your name and case number (if known).

For each item of property you claim as exempt, you must specify the amount of the exemption you claim. One way of doing so is to state a specific dollar amount as exempt. Alternatively, you may claim the full fair market value of the property being exempted up to the amount of any applicable statutory limit. Some exemptions—such as those for health aids, rights to receive certain benefits, and tax-exempt retirement funds—may be unlimited in dollar amount. However, if you claim an exemption of 100% of fair market value under a law that limits the exemption to a particular dollar amount and the value of the property is determined to exceed that amount, your exemption would be limited to the applicable statutory amount.

Part 1: Identify the Property	<sup>,</sup> You Claim as Exempt
-------------------------------	----------------------------------

١.	which set of exemptions are you claiming? Check one only, even if your spouse is filling with you.							
	☐ You are claiming state and federal nonbar	nkruptcy exemptions.	11 U.S	S.C. § 522(b)(3)				
	■ You are claiming federal exemptions. 11	U.S.C. § 522(b)(2)						
2.	For any property you list on Schedule A/E	that you claim as exe	empt,	fill in the information below.				
	Brief description of the property and line on Schedule A/B that lists this property	Current value of the portion you own	Amo	ount of the exemption you claim	Specific laws that allow exemption			
	, , , , , , , , , , , , , , , , , , , ,	Copy the value from Schedule A/B	Che	eck only one box for each exemption.				
	18 Dartmouth Rd Old Bridge Twp Parlin, NJ 08859 Middlesex County	\$300,000.00		\$17,294.20	11 U.S.C. § 522(d)(1)			
	Line from Schedule A/B: 1.1			100% of fair market value, up to any applicable statutory limit				
	2012 Ford Escape 80k miles Line from Schedule A/B: 3.1	\$4,800.00		<b>\$714.60</b>	11 U.S.C. § 522(d)(5)			
	Line nom Schedule A/B. 3.1			100% of fair market value, up to any applicable statutory limit				
	2006 Hyundai Sonata 92k miles Line from Schedule A/B: 3.2	\$1,300.00		\$1,300.00	11 U.S.C. § 522(d)(2)			
	Line nom Schedule A/B. 3.2			100% of fair market value, up to any applicable statutory limit				
	Household Goods and Furnishings including but not limited to beds,	\$2,500.00		\$2,500.00	11 U.S.C. § 522(d)(3)			
	dressers, nightstands, appliances, couches, lamps, tables, chairs, pots/pans, dinnerware, flatware, domestics, iron, etc. Line from Schedule A/B: 6.1			100% of fair market value, up to any applicable statutory limit				

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Case number (if known)

	inary a o bornion				
	Brief description of the property and line on Schedule A/B that lists this property	Current value of the portion you own			Specific laws that allow exemption
		Copy the value from Schedule A/B	Che	eck only one box for each exemption.	
	TV, clocks, cell phone, laptop computer, DVD player	\$500.00		\$500.00	11 U.S.C. § 522(d)(5)
	Line from Schedule A/B: 7.1			100% of fair market value, up to any applicable statutory limit	
	ordinary used clothing Line from Schedule A/B: 11.1	\$400.00		\$400.00	11 U.S.C. § 522(d)(3)
	Enterior Concada (772. TTT			100% of fair market value, up to any applicable statutory limit	
	checking/savings account: Chase Bank	\$1,018.00		\$1,018.00	11 U.S.C. § 522(d)(5)
C P	Citibank PNC Bank Line from Schedule A/B: 17.1			100% of fair market value, up to any applicable statutory limit	
	child support: DSO benefits due debtor	Unknown			11 U.S.C. § 522(d)(10)(D)
	Line from Schedule A/B: 29.1			100% of fair market value, up to any applicable statutory limit	
	Allstate Assurance Co Beneficiary: daughter	\$1,345.97		\$1,345.97	11 U.S.C. § 522(d)(8)
	Line from Schedule A/B: 31.1			100% of fair market value, up to any applicable statutory limit	
3.	Are you claiming a homestead exemption (Subject to adjustment on 4/01/19 and every			led on or after the date of adjustmer	nt.)
	□ No	Tod by the exemption w		,2 to days boloto you filed this case	•
	☐ Yes				

		Document	Page 18	3 of 71		
Fill in this informat	tion to identify you	r case:				
Debtor 1	MaryLu O'Donne	ell				
-	First Name	Middle Name	Last Name			
Debtor 2 (Spouse if, filing)	First Name	Middle Name	Last Name			
United States Bankı	ruptcy Court for the:	DISTRICT OF NEW JERSEY				
Case number						
(if known)					_	if this is an led filing
Official Form	106D					
		Who Hous Claims S	`	d by Droport		40/45
Schedule D	: Creditors	Who Have Claims S	<u>secure</u>	d by Propert	у	12/15
		f two married people are filing togethe out, number the entries, and attach it to				
1. Do any creditors ha	ve claims secured by	your property?				
☐ No. Check th	nis box and submit th	nis form to the court with your other s	chedules. Y	ou have nothing else t	o report on this form.	
■ Yes. Fill in al	I of the information b	pelow.				
Part 1: List All S	Secured Claims					
2. List all secured cla for each claim. If more	nims. If a creditor has note than one creditor has	nore than one secured claim, list the cred a particular claim, list the other creditors all order according to the creditor's name	in Part 2. As	Column A  Amount of claim Do not deduct the	Column B  Value of collateral that supports this	Column C Unsecured portion
	·	Ç		value of collateral.	claim	If any
2.1 Caliber Hom	ne Loans, Inc.	Describe the property that secures the claim:		\$34,780.05	\$300,000.00	\$0.00
		18 Dartmouth Rd Old Bridge Parlin, NJ 08859 Middlesex C				
PO Box 246		As of the date you file, the claim is: C	heck all that			
Oklahoma C 73124-0610	Jity, OK	apply.  Contingent				
	ty, State & Zip Code	☐ Unliquidated				
, , , , , , , , ,	,, ,	☐ Disputed				
Who owes the debt	? Check one.	Nature of lien. Check all that apply.				
Debtor 1 only		An agreement you made (such as m	ortgage or se	cured		
Debtor 2 only		car loan)				
Debtor 1 and Debto	•	Statutory lien (such as tax lien, mech	nanic's lien)			
At least one of the		☐ Judgment lien from a lawsuit				
☐ Check if this clain community debt	n relates to a	Other (including a right to offset)	Second Mo	ortgage incl deferre	ed balance	
Date debt was incurre	ed	Last 4 digits of account number	er <u>4970</u>			
2.2 Ford Motor	Credit Corp	Describe the property that secures th	e claim:	\$4,085.40	\$4,800.00	\$0.00
Creditor's Name		2012 Ford Escape 80k miles		<u> </u>	<u> </u>	
Natl Bkcy S	vc Cntr	As of the date you file, the claim is: C	heck all that			
Box 537901 Livonia, MI	48153-7001	apply.				
	ty, State & Zip Code	☐ Contingent ☐ Unliquidated				
Number, Street, Or	ty, State & Zip Code	☐ Disputed				
Who owes the debt	? Check one.	Nature of lien. Check all that apply.				
Debtor 1 only		An agreement you made (such as m	ortgage or se	cured		
Debtor 2 only		car loan)				
☐ Debtor 1 and Debto	or 2 only	☐ Statutory lien (such as tax lien, mech	nanic's lien)			
At least one of the		U Judgment lien from a lawsuit				
☐ Check if this clain community debt	n relates to a	Other (including a right to offset)				
Date debt was incurr	od 11/2011	Last 4 digits of account number	or 1717			

Official Form 106D

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Deb	tor 1 MaryLu O'Donnell		Case number (if known)				
	First Name Middle N	lame Last Name	_				
2.3	Select Portfolio Servicing	Describe the property that secures	the claim:	\$247,925.75	\$300,000.00	\$0.00	
	Creditor's Name	18 Dartmouth Rd Old Bridg Parlin, NJ 08859 Middlesex	• •				
	PO Box 65250 Salt Lake City, UT 84165-0250	As of the date you file, the claim is: apply.  Contingent	Check all that				
	Number, Street, City, State & Zip Code	☐ Unliquidated					
		☐ Disputed  Nature of lien. Check all that apply.					
_	Debtor 1 only	An agreement you made (such as car loan)	mortgage or s	secured			
	Debtor 1 and Debtor 2 only	☐ Statutory lien (such as tax lien, med ☐ Judgment lien from a lawsuit	echanic's lien)				
	check if this claim relates to a community debt	Other (including a right to offset)	First Mor	tgage			
Date	debt was incurred	Last 4 digits of account num	ber <u>8688</u>	<u> </u>			
Ad	d the dollar value of your entries in C	Column A on this page. Write that nun	nber here:	\$286,791.	20		
	his is the last page of your form, add	the dollar value totals from all pages		\$286,791.	20		

#### Part 2: List Others to Be Notified for a Debt That You Already Listed

Write that number here:

Use this page only if you have others to be notified about your bankruptcy for a debt that you already listed in Part 1. For example, if a collection agency is trying to collect from you for a debt you owe to someone else, list the creditor in Part 1, and then list the collection agency here. Similarly, if you have more than one creditor for any of the debts that you listed in Part 1, list the additional creditors here. If you do not have additional persons to be notified for any debts in Part 1, do not fill out or submit this page.

	30 10 00000 MBR	Document Document	Page 2	0 of 71		ı
Fill in this in	formation to identify your					
Debtor 1	MaryLu O'Donnel	I				
	First Name	Middle Name	Last Name			
Debtor 2	First Name	Middle Name	Lost Name			
(Spouse if, filing)	First Name	Middle Name	Last Name			
United States	Bankruptcy Court for the:	DISTRICT OF NEW JERSE	:Y			
Case number						
(if known)					☐ Check if this is a	an
					amended filing	
Official Ed	orm 106E/F					
		/ho Have Unsecure	d Claims		12/1	5
				Dort 2 for graditors with N	ONPRIORITY claims. List the other	
schedule G: Ex schedule D: Cr eft. Attach the ame and case	ecutory Contracts and Unexpeditors Who Have Claims Sec Continuation Page to this pag number (if known).	oired Leases (Official Form 106G cured by Property. If more space ge. If you have no information to	). Do not include is needed, copy	any creditors with partiall the Part you need, fill it ou	: Property (Official Form 106A/B) y secured claims that are listed in t, number the entries in the boxe e top of any additional pages, wri	n es on the
	t All of Your PRIORITY Ur					
_ `	editors have priority unsecure	d claims against you?				
No. Go	to Part 2.					
☐ Yes.	. All . CV . NONDDIODIT					
	t All of Your NONPRIORIT					
	editors have nonpriority unsec					
☐ No. You	I have nothing to report in this p	art. Submit this form to the court w	ith your other sche	edules.		
Yes.						
unsecured	claim, list the creditor separatel	y for each claim. For each claim lis	sted, identify what t	type of claim it is. Do not list	ditor has more than one nonpriority claims already included in Part 1. It I claims fill out the Continuation Pag	f more
					Total claim	
4.1 <b>Ama</b>	zon/Synchrony Bank	Last 4 digits of a	account number	1824	\$2,	,054.98
•	iority Creditor's Name  Bankruptcy Dept.	When was the d	abt incurred?			
	Box 965061	when was the u	est incurred?			
Orla	ndo, FL 32896-5061					
	er Street City State Zlp Code	As of the date yo	ou file, the claim	is: Check all that apply		
_	ncurred the debt? Check one.	_				
	btor 1 only	☐ Contingent				
	btor 2 only	☐ Unliquidated				
	btor 1 and Debtor 2 only	☐ Disputed	IODITY	.d.alaine.		
	least one of the debtors and an	П с	IORITY unsecure	a ciaim:		
∐ Ch debt	eck if this claim is for a com	unity		aration agreement or divorce	that you did not	
	claim subject to offset?	report as priority		aradori agreement or divorce	that you did not	
■ No		☐ Debts to pens	ion or profit-sharir	ng plans, and other similar de	ebts	
☐ Ye	S	Other. Specify	Credit			

Document Page 21 of 71 Debtor 1 MaryLu O'Donnell Case number (if known) 4.2 \$5,939.52 **Avant LLC** Last 4 digits of account number 7246 Nonpriority Creditor's Name 222 N. La Salle Street When was the debt incurred? **Suite 1700** Chicago, IL 60601 Number Street City State Zlp Code As of the date you file, the claim is: Check all that apply Who incurred the debt? Check one. ■ Debtor 1 only ☐ Contingent Debtor 2 only ■ Unliquidated Debtor 1 and Debtor 2 only ☐ Disputed Type of NONPRIORITY unsecured claim: ☐ At least one of the debtors and another ☐ Student loans ☐ Check if this claim is for a community  $\square$  Obligations arising out of a separation agreement or divorce that you did not Is the claim subject to offset? report as priority claims ■ No Debts to pension or profit-sharing plans, and other similar debts ☐ Yes Personal Loan Other, Specify **Bank of America** 4.3 Last 4 digits of account number 1481 \$4,310.18 Nonpriority Creditor's Name PO Box 982234 When was the debt incurred? El Paso, TX 79998-2234 Number Street City State Zlp Code As of the date you file, the claim is: Check all that apply Who incurred the debt? Check one. ■ Debtor 1 only ☐ Contingent Debtor 2 only ■ Unliquidated ☐ Disputed Debtor 1 and Debtor 2 only Type of NONPRIORITY unsecured claim:  $\square$  At least one of the debtors and another ☐ Student loans ☐ Check if this claim is for a community  $\hfill\square$  Obligations arising out of a separation agreement or divorce that you did not Is the claim subject to offset? report as priority claims  $\square$  Debts to pension or profit-sharing plans, and other similar debts ■ No ■ Other. Specify Credit ☐ Yes 4.4 **Best Buy/Citibank** \$2,296.98 Last 4 digits of account number 3554 Nonpriority Creditor's Name PO Box 15298 When was the debt incurred? Wilmington, DE 19850-5298 Number Street City State Zlp Code As of the date you file, the claim is: Check all that apply Who incurred the debt? Check one. ■ Debtor 1 only ☐ Contingent Debtor 2 only ■ Unliquidated Debtor 1 and Debtor 2 only ☐ Disputed Type of NONPRIORITY unsecured claim: ☐ At least one of the debtors and another ☐ Student loans ☐ Check if this claim is for a community  $\square$  Obligations arising out of a separation agreement or divorce that you did not Is the claim subject to offset? report as priority claims

■ No

☐ Yes

Other. Specify Credit

Debts to pension or profit-sharing plans, and other similar debts

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Debtor 1 MaryLu O'Donnell ase number (if known) 4.5 \$6,228.85 **Capital One** Last 4 digits of account number 1259 Nonpriority Creditor's Name **Bankruptcy Department** When was the debt incurred? PO Box 30285 Salt Lake City, UT 84130-0285 Number Street City State Zlp Code As of the date you file, the claim is: Check all that apply Who incurred the debt? Check one. ■ Debtor 1 only ☐ Contingent Debtor 2 only ■ Unliquidated Debtor 1 and Debtor 2 only ☐ Disputed Type of NONPRIORITY unsecured claim: At least one of the debtors and another ☐ Student loans ☐ Check if this claim is for a community  $\square$  Obligations arising out of a separation agreement or divorce that you did not Is the claim subject to offset? report as priority claims ■ No Debts to pension or profit-sharing plans, and other similar debts Other. Specify Credit ☐ Yes **Capital One** 4.6 Last 4 digits of account number 7013 \$8,541.56 Nonpriority Creditor's Name **Bankruptcy Department** When was the debt incurred? PO Box 30285 Salt Lake City, UT 84130-0285 Number Street City State Zlp Code As of the date you file, the claim is: Check all that apply Who incurred the debt? Check one. ■ Debtor 1 only ☐ Contingent Debtor 2 only ☐ Unliquidated ☐ Disputed Debtor 1 and Debtor 2 only Type of NONPRIORITY unsecured claim: ☐ At least one of the debtors and another ☐ Student loans ☐ Check if this claim is for a community debt  $\hfill\square$  Obligations arising out of a separation agreement or divorce that you did not Is the claim subject to offset? report as priority claims  $\hfill\square$  Debts to pension or profit-sharing plans, and other similar debts ■ No ☐ Yes Credit Other. Specify 4.7 Last 4 digits of account number \$689.00 **Capital One** 1637 Nonpriority Creditor's Name **Bankruptcy Department** When was the debt incurred? PO Box 30285 Salt Lake City, UT 84130-0285 Number Street City State Zlp Code As of the date you file, the claim is: Check all that apply Who incurred the debt? Check one. Debtor 1 only ☐ Contingent Debtor 2 only ■ Unliquidated Debtor 1 and Debtor 2 only ☐ Disputed Type of NONPRIORITY unsecured claim: At least one of the debtors and another ☐ Student loans ☐ Check if this claim is for a community debt  $\square$  Obligations arising out of a separation agreement or divorce that you did not Is the claim subject to offset? report as priority claims  $\hfill\square$  Debts to pension or profit-sharing plans, and other similar debts ■ No ☐ Yes Other. Specify Credit

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ase number (if known)

Debtor 1 MaryLu O'Donnell 4.8 \$1,516.00 Care Credit/Synchrony Bank Last 4 digits of account number 2800 Nonpriority Creditor's Name Attn: Bankruptcy Dept When was the debt incurred? PO Box 965064 Orlando, FL 32896-5064 Number Street City State Zlp Code As of the date you file, the claim is: Check all that apply Who incurred the debt? Check one. ■ Debtor 1 only ☐ Contingent Debtor 2 only ■ Unliquidated Debtor 1 and Debtor 2 only ☐ Disputed Type of NONPRIORITY unsecured claim: At least one of the debtors and another ☐ Student loans ☐ Check if this claim is for a community  $\square$  Obligations arising out of a separation agreement or divorce that you did not Is the claim subject to offset? report as priority claims ■ No Debts to pension or profit-sharing plans, and other similar debts Other. Specify Credit ☐ Yes 4.9 Chase Last 4 digits of account number 4365 \$3,019.00 Nonpriority Creditor's Name PO Box 15298 When was the debt incurred? Att: Bankruptcy Dept Wilmington, DE 19850-5298 Number Street City State Zlp Code As of the date you file, the claim is: Check all that apply Who incurred the debt? Check one. ■ Debtor 1 only ☐ Contingent Debtor 2 only ☐ Unliquidated ☐ Debtor 1 and Debtor 2 only ☐ Disputed Type of NONPRIORITY unsecured claim: ☐ At least one of the debtors and another ☐ Student loans ☐ Check if this claim is for a community debt  $\square$  Obligations arising out of a separation agreement or divorce that you did not Is the claim subject to offset? report as priority claims ☐ Debts to pension or profit-sharing plans, and other similar debts ■ No ☐ Yes Credit Other. Specify 4.1 8564 \$1.331.00 Chase Last 4 digits of account number Nonpriority Creditor's Name When was the debt incurred? PO Box 15298 Att: Bankruptcy Dept Wilmington, DE 19850-5298 Number Street City State Zlp Code As of the date you file, the claim is: Check all that apply Who incurred the debt? Check one. ■ Debtor 1 only ☐ Contingent Debtor 2 only ☐ Unliquidated Debtor 1 and Debtor 2 only ☐ Disputed Type of NONPRIORITY unsecured claim: ☐ At least one of the debtors and another ☐ Student loans ☐ Check if this claim is for a community debt oxed Obligations arising out of a separation agreement or divorce that you did not Is the claim subject to offset? report as priority claims ☐ Debts to pension or profit-sharing plans, and other similar debts ■ No ☐ Yes ■ Other. Specify Credit

Document Page 24 of 71 Debtor 1 MaryLu O'Donnell Case number (if known) 4.1 Citibank 4704 \$2,754.20 Last 4 digits of account number Nonpriority Creditor's Name P.O. Box 6500 When was the debt incurred? Sioux Falls, SD 57117 Number Street City State Zlp Code As of the date you file, the claim is: Check all that apply Who incurred the debt? Check one. ■ Debtor 1 only ☐ Contingent Debtor 2 only ☐ Unliquidated Debtor 1 and Debtor 2 only ☐ Disputed Type of NONPRIORITY unsecured claim: ☐ At least one of the debtors and another ☐ Student loans ☐ Check if this claim is for a community debt  $\hfill\square$  Obligations arising out of a separation agreement or divorce that you did not Is the claim subject to offset? report as priority claims Debts to pension or profit-sharing plans, and other similar debts ■ No ☐ Yes ■ Other. Specify Credit 4.1 **Credit One Bank** 0675 \$2,711.00 Last 4 digits of account number Nonpriority Creditor's Name PO Box 98873 When was the debt incurred? Las Vegas, NV 89193 Number Street City State Zlp Code As of the date you file, the claim is: Check all that apply Who incurred the debt? Check one. ■ Debtor 1 only ☐ Contingent Debtor 2 only ☐ Unliquidated Debtor 1 and Debtor 2 only ☐ Disputed Type of NONPRIORITY unsecured claim: At least one of the debtors and another ☐ Student loans ☐ Check if this claim is for a community debt ☐ Obligations arising out of a separation agreement or divorce that you did not Is the claim subject to offset? report as priority claims ☐ Debts to pension or profit-sharing plans, and other similar debts ■ No ☐ Yes ■ Other. Specify Credit 4.1 **Dell Financial Services** 0228 \$456.00 Last 4 digits of account number Nonpriority Creditor's Name Att: Bankruptcy Dept. When was the debt incurred? PO Box 81577 Austin, TX 78708-1577 As of the date you file, the claim is: Check all that apply Number Street City State Zlp Code Who incurred the debt? Check one. ■ Debtor 1 only ☐ Contingent Debtor 2 only ■ Unliquidated ☐ Debtor 1 and Debtor 2 only ☐ Disputed Type of NONPRIORITY unsecured claim: ☐ At least one of the debtors and another ☐ Student loans ☐ Check if this claim is for a community debt  $oxed{\square}$  Obligations arising out of a separation agreement or divorce that you did not Is the claim subject to offset? report as priority claims  $\hfill\square$  Debts to pension or profit-sharing plans, and other similar debts ■ No

☐ Yes

■ Other. Specify Credit

Debtor	1 MaryLu O'Donnell	Case number (if known)	
4.1	Garden State Healthcare Associates	Last 4 digits of account number 7511	\$1,271.00
	Nonpriority Creditor's Name PO Box 20502	When was the debt incurred?	
	Newark, NJ 07101-5502		
	Number Street City State Zlp Code	As of the date you file, the claim is: Check all that apply	
	Who incurred the debt? Check one.		
	■ Debtor 1 only	☐ Contingent	
	☐ Debtor 2 only	☐ Unliquidated	
	☐ Debtor 1 and Debtor 2 only	☐ Disputed	
	$\square$ At least one of the debtors and another	Type of NONPRIORITY unsecured claim:	
	☐ Check if this claim is for a community	☐ Student loans	
	debt Is the claim subject to offset?	☐ Obligations arising out of a separation agreement or divorce that you did not report as priority claims	
	■ No	lacksquare Debts to pension or profit-sharing plans, and other similar debts	
	Yes	Other. Specify Medical	
4.1	Genesis Bankcard Services	Last 4 digits of account number 7866	\$329.50
5	Nonpriority Creditor's Name		•
	PO Box 4477	When was the debt incurred?	
	Reaverton, OR 97076-4477  Number Street City State Zlp Code	As of the date you file, the claim is: Check all that apply	
	Who incurred the debt? Check one.	7.6 of the date you me, the dam io. Officer all that apply	
	Debtor 1 only	☐ Contingent	
	☐ Debtor 2 only	☐ Unliquidated	
	☐ Debtor 1 and Debtor 2 only	□ Disputed	
	☐ At least one of the debtors and another	Type of NONPRIORITY unsecured claim:	
	☐ Check if this claim is for a community	☐ Student loans	
	debt	$\square$ Obligations arising out of a separation agreement or divorce that you did not	
	Is the claim subject to offset?	report as priority claims	
	■ No	☐ Debts to pension or profit-sharing plans, and other similar debts	
	Yes	Other. Specify Credit	
4.1	Home Depot/Citibank	Last 4 digits of account number 9186	\$2,235.30
	Nonpriority Creditor's Name		
	PO Box 790328	When was the debt incurred?	
	Number Street City State Zlp Code	As of the date you file, the claim is: Check all that apply	
	Who incurred the debt? Check one.		
	Debtor 1 only	☐ Contingent	
	Debtor 2 only	☐ Unliquidated	
	☐ Debtor 1 and Debtor 2 only	☐ Disputed	
	☐ At least one of the debtors and another	Type of NONPRIORITY unsecured claim:	
	☐ Check if this claim is for a community	☐ Student loans	
	debt Is the claim subject to offset?	☐ Obligations arising out of a separation agreement or divorce that you did not report as priority claims	

■ No

☐ Yes

■ Other. Specify Credit

 $\hfill\square$  Debts to pension or profit-sharing plans, and other similar debts

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JCPenney/Synchrony Bank	Last 4 digits of account number 2451	\$1,
Nonpriority Creditor's Name Att: Bankruptcy Department PO Box 965060	When was the debt incurred?	
Orlando, FL 32896-5060  Number Street City State Zlp Code  Who incurred the debt? Check one.	As of the date you file, the claim is: Check all that apply	
Debtor 1 only	☐ Contingent	
☐ Debtor 2 only	☐ Unliquidated	
☐ Debtor 1 and Debtor 2 only	☐ Disputed	
☐ At least one of the debtors and another	Type of NONPRIORITY unsecured claim:	
☐ Check if this claim is for a community	☐ Student loans	
debt s the claim subject to offset?	$\square$ Obligations arising out of a separation agreement or divorce that you did not report as priority claims	
No	$\square$ Debts to pension or profit-sharing plans, and other similar debts	
☐ Yes	Other. Specify Credit	
Kohl's Nonpriority Creditor's Name	Last 4 digits of account number 7304	\$
PO Box 3043 Milwaukee, WI 53201-3043	When was the debt incurred?	
Number Street City State Zlp Code  Who incurred the debt? Check one.	As of the date you file, the claim is: Check all that apply	
Debtor 1 only	☐ Contingent	
☐ Debtor 2 only	☐ Unliquidated	
☐ Debtor 1 and Debtor 2 only	□ Disputed	
☐ At least one of the debtors and another	Type of NONPRIORITY unsecured claim:	
☐ Check if this claim is for a community	☐ Student loans	
debt s the claim subject to offset?	☐ Obligations arising out of a separation agreement or divorce that you did not report as priority claims	
No	☐ Debts to pension or profit-sharing plans, and other similar debts	
□ Yes	■ Other. Specify Credit	
Lord & Taylor	Last 4 digits of account number 7862	\$1,
Nonpriority Creditor's Name Att: Bankruptcy Department PO Box 103104 Roswell, GA 30076	When was the debt incurred?	
Number Street City State Zlp Code  Who incurred the debt? Check one.	As of the date you file, the claim is: Check all that apply	
Debtor 1 only	☐ Contingent	
Debtor 2 only	☐ Unliquidated	
Debtor 1 and Debtor 2 only	☐ Disputed	
$\square$ At least one of the debtors and another	Type of NONPRIORITY unsecured claim:	
☐ Check if this claim is for a community	☐ Student loans	
debt	$\square$ Obligations arising out of a separation agreement or divorce that you did not	
s the claim subject to offset?	report as priority claims	

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Case number (if known)

Debtor	1 MaryLu O'Donnell	Case number (if known)	
4.2	Macy's	Last 4 digits of account number 7003	\$1,535.00
U	Nonpriority Creditor's Name Att: Bankruptcy Dept. PO Box 8053	When was the debt incurred?	•
	Mason, OH 45040  Number Street City State Zlp Code  Who incurred the debt? Check one.	As of the date you file, the claim is: Check all that apply	
	■ Debtor 1 only	☐ Contingent	
	☐ Debtor 2 only	☐ Unliquidated	
	☐ Debtor 1 and Debtor 2 only	☐ Disputed	
	☐ At least one of the debtors and another	Type of NONPRIORITY unsecured claim:	
	☐ Check if this claim is for a community	☐ Student loans	
	debt Is the claim subject to offset?	☐ Obligations arising out of a separation agreement or divorce that you did not report as priority claims	
	■ No	$\square$ Debts to pension or profit-sharing plans, and other similar debts	
	Yes	■ Other. Specify Credit	
4.2	Old Navy Nonpriority Creditor's Name	Last 4 digits of account number 9945	\$64.00
	Att: Bankruptcy Dept PO Box 103104 Roswell, GA 30076	When was the debt incurred?	
	Number Street City State Zlp Code Who incurred the debt? Check one.	As of the date you file, the claim is: Check all that apply	
	■ Debtor 1 only	☐ Contingent	
	Debtor 2 only	☐ Unliquidated	
	☐ Debtor 1 and Debtor 2 only	☐ Disputed	
	$\square$ At least one of the debtors and another	Type of NONPRIORITY unsecured claim:	
	$\square$ Check if this claim is for a community debt	☐ Student loans ☐ Obligations arising out of a separation agreement or divorce that you did not	
	Is the claim subject to offset?	report as priority claims	
	No	☐ Debts to pension or profit-sharing plans, and other similar debts	
	Yes	■ Other. Specify Credit	
4.2	PayPal Credit Nonpriority Creditor's Name	Last 4 digits of account number 8343	\$2,000.00
	PO Box 5138 Timonium, MD 21094	When was the debt incurred?	
	Number Street City State Zlp Code Who incurred the debt? Check one.	As of the date you file, the claim is: Check all that apply	
	■ Debtor 1 only	☐ Contingent	
	Debtor 2 only	☐ Unliquidated	
	☐ Debtor 1 and Debtor 2 only	☐ Disputed	
	$\square$ At least one of the debtors and another	Type of NONPRIORITY unsecured claim:	
	☐ Check if this claim is for a community	Student loans	
	debt Is the claim subject to offset?	Obligations arising out of a separation agreement or divorce that you did not report as priority claims	
	No	Debts to pension or profit-sharing plans, and other similar debts	
	Yes	Other, Specify Credit	

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Debto	MaryLu O'Donnell	Case number (if known)	
4.2	DO D. I	7050	****
3	PC Richard/Synchrony Bank	Last 4 digits of account number 7356	\$360.62
	Nonpriority Creditor's Name PO Box 965033 Orlando, FL 32896	When was the debt incurred?	
	Number Street City State Zlp Code	As of the date you file, the claim is: Check all that apply	
	Who incurred the debt? Check one.		
	Debtor 1 only	☐ Contingent	
	Debtor 2 only	☐ Unliquidated	
	Debtor 1 and Debtor 2 only	☐ Disputed	
	☐ At least one of the debtors and another	Type of NONPRIORITY unsecured claim:	
	☐ Check if this claim is for a community	☐ Student loans	
	debt	☐ Obligations arising out of a separation agreement or divorce that you did not	
	Is the claim subject to offset?	report as priority claims	
	No	Debts to pension or profit-sharing plans, and other similar debts	
	Yes	Other. Specify Credit	
4.2	Raymour & Flanagan	Last 4 digits of account number 8747	\$1,063.96
4	Nonpriority Creditor's Name	Last 4 digits of account number	ψ1,000.00
	PO Box 130	When was the debt incurred?	
	Liverpool, NY 13088	= 4 44 44 90 44 44 5	
	Number Street City State Zlp Code  Who incurred the debt? Check one.	As of the date you file, the claim is: Check all that apply	
	_		
	Debtor 1 only	Contingent	
	Debtor 2 only	Unliquidated	
	Debtor 1 and Debtor 2 only	Disputed	
	At least one of the debtors and another	Type of NONPRIORITY unsecured claim:	
	☐ Check if this claim is for a community	Student loans	
	debt Is the claim subject to offset?	Dobligations arising out of a separation agreement or divorce that you did not report as priority claims	
	■ No	☐ Debts to pension or profit-sharing plans, and other similar debts	
	<u> </u>		
	☐ Yes	■ Other. Specify Credit	
4.2	Simons Agency	Last 4 digits of account number 7755	\$258.00
<u> </u>	Nonpriority Creditor's Name		· · · · · · · · · · · · · · · · · · ·
	4963 Wintersweet Drive	When was the debt incurred?	
	Liverpool, NY 13088  Number Street City State Zlp Code	As of the date you file the plain is: Check all that apply	
	Who incurred the debt? Check one.	As of the date you file, the claim is: Check all that apply	
	Debtor 1 only	Полож	
	_	Contingent	
	Debtor 2 only	☐ Unliquidated	
	☐ Debtor 1 and Debtor 2 only	☐ Disputed  Type of NONPRIORITY unsecured claim:	
	☐ At least one of the debtors and another	Student loans	
	☐ Check if this claim is for a community debt		
	Is the claim subject to offset?	Dobligations arising out of a separation agreement or divorce that you did not report as priority claims	
	■ No	☐ Debts to pension or profit-sharing plans, and other similar debts	
	Yes		
	<b>□</b> 169	Other. Specify Medical	

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Debtor	1 MaryLu O'Donnell	Case number (if known)	
4.2	The Lending Club	Last 4 digits of account number	\$25,000.00
	Nonpriority Creditor's Name 71 Stevenson Avenue Suite 300	When was the debt incurred?	
	San Francisco, CA 94105 Number Street City State Zlp Code	As of the date you file, the claim is: Check all that apply	
	Who incurred the debt? Check one.		
	Debtor 1 only	☐ Contingent	
	Debtor 2 only	Unliquidated	
	Debtor 1 and Debtor 2 only	Disputed	
	At least one of the debtors and another	Type of NONPRIORITY unsecured claim:  ☐ Student loans	
	☐ Check if this claim is for a community debt  Is the claim subject to offset?	☐ Obligations arising out of a separation agreement or divorce that you did not report as priority claims	
	No	☐ Debts to pension or profit-sharing plans, and other similar debts	
	□ Yes	Other. Specify Personal Loan	
4.2	Triumvirate Medical Group	Last 4 digits of account number 6482	\$242.94
<i>I</i>	Nonpriority Creditor's Name 168 Franklin Corner Road	When was the debt incurred?	·
	B 1, Suite 2A Lawrence Township, NJ 08648-2529		
	Number Street City State Zlp Code	As of the date you file, the claim is: Check all that apply	
	Who incurred the debt? Check one.		
	■ Debtor 1 only	☐ Contingent	
	Debtor 2 only	☐ Unliquidated	
	Debtor 1 and Debtor 2 only	☐ Disputed	
	☐ At least one of the debtors and another	Type of NONPRIORITY unsecured claim:	
	☐ Check if this claim is for a community	☐ Student loans	
	debt Is the claim subject to offset?	Obligations arising out of a separation agreement or divorce that you did not report as priority claims	
	■ No	☐ Debts to pension or profit-sharing plans, and other similar debts	
	Yes	Other. Specify Credit	
4.2	Walmart/Sychrony Bank	Last 4 digits of account number 0449	\$5,216.97
	Nonpriority Creditor's Name PO Box 965024 Orlando, FL 32896	When was the debt incurred?	
	Number Street City State Zlp Code	As of the date you file, the claim is: Check all that apply	
	Who incurred the debt? Check one.		
	■ Debtor 1 only	☐ Contingent	
	Debtor 2 only	☐ Unliquidated	
	Debtor 1 and Debtor 2 only	☐ Disputed	
	☐ At least one of the debtors and another	Type of NONPRIORITY unsecured claim:	
	☐ Check if this claim is for a community	Student loans	
	debt Is the claim subject to offset?	☐ Obligations arising out of a separation agreement or divorce that you did not report as priority claims	
	No	□ Debts to pension or profit-sharing plans, and other similar debts	
	☐ Yes	Other. Specify Credit	

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Frontline Asset Strategies 2700 Snelling Ave N Ste 250 Saint Paul, MN 55113

On which entry in Part 1 or Part 2 did you list the original creditor?

Line 4.19 of (Check one):

☐ Part 1: Creditors with Priority Unsecured Claims ■ Part 2: Creditors with Nonpriority Unsecured Claims

Last 4 digits of account number

On which entry in Part 1 or Part 2 did you list the original creditor?

Name and Address

Page 31 of 71 Case number (if known) Document Debtor 1 MaryLu O'Donnell Lyons Doughty & Veldhuis Line 4.6 of (Check one): ☐ Part 1: Creditors with Priority Unsecured Claims Box 1269 Part 2: Creditors with Nonpriority Unsecured Claims Mt Laurel, NJ 08054 Last 4 digits of account number Name and Address On which entry in Part 1 or Part 2 did you list the original creditor? Lyons, Doughty & Veldhuis PC Line 4.5 of (Check one): ☐ Part 1: Creditors with Priority Unsecured Claims PO Box 1269 Part 2: Creditors with Nonpriority Unsecured Claims Mount Laurel, NJ 08054 Last 4 digits of account number 1259 Name and Address On which entry in Part 1 or Part 2 did you list the original creditor? Mullooly, Jeffrey, Rooney & Flynn Line 4.3 of (Check one): ☐ Part 1: Creditors with Priority Unsecured Claims PO Box 9036 Part 2: Creditors with Nonpriority Unsecured Claims Syosset, NY 11791-9036 Last 4 digits of account number 9610 Name and Address On which entry in Part 1 or Part 2 did you list the original creditor? Selip & Stylianou LLP Line 4.28 of (Check one): ☐ Part 1: Creditors with Priority Unsecured Claims PO Box 914 Part 2: Creditors with Nonpriority Unsecured Claims Paramus, NJ 07653 Last 4 digits of account number Name and Address On which entry in Part 1 or Part 2 did you list the original creditor? Selip & Stylianou LLP ☐ Part 1: Creditors with Priority Unsecured Claims Line 4.1 of (Check one): PO Box 914 ■ Part 2: Creditors with Nonpriority Unsecured Claims Paramus, NJ 07653 Last 4 digits of account number Name and Address On which entry in Part 1 or Part 2 did you list the original creditor? Tenaglia & Hunt Line 4.11 of (Check one): ☐ Part 1: Creditors with Priority Unsecured Claims 395 W. Passaic Street Part 2: Creditors with Nonpriority Unsecured Claims Suite 205 Rochelle Park, NJ 07662 Last 4 digits of account number On which entry in Part 1 or Part 2 did you list the original creditor? Name and Address Tenaglia & Hunt PA Line 4.4 of (Check one): ☐ Part 1: Creditors with Priority Unsecured Claims 395 West Passaic Street ■ Part 2: Creditors with Nonpriority Unsecured Claims Suite 205 Rochelle Park, NJ 07662 Last 4 digits of account number Name and Address On which entry in Part 1 or Part 2 did you list the original creditor? Tenaglia & Hunt, PA Line 4.16 of (Check one): ☐ Part 1: Creditors with Priority Unsecured Claims 395 W. Passaic Street ■ Part 2: Creditors with Nonpriority Unsecured Claims Suite 205 Rochelle Park, NJ 07662 Last 4 digits of account number Part 4: Add the Amounts for Each Type of Unsecured Claim 6. Total the amounts of certain types of unsecured claims. This information is for statistical reporting purposes only. 28 U.S.C. §159. Add the amounts for each type of unsecured claim. **Total Claim Domestic support obligations** 6a. 6a. 0.00 Total claims Taxes and certain other debts you owe the government 6b. from Part 1 6b. 0.00 Claims for death or personal injury while you were intoxicated 6c. 6c. 0.00 6d. Other. Add all other priority unsecured claims. Write that amount here. 6d. 0.00 Total Priority. Add lines 6a through 6d. 6e 0.00 **Total Claim** Student loans 6f 0.00

Total

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from Part 2	6g.	Obligations arising out of a separation agreement or divorce that you did not report as priority claims	6g.	\$ 0.00
	6h.	Debts to pension or profit-sharing plans, and other similar debts	6h.	\$ 0.00
	6i.	<b>Other.</b> Add all other nonpriority unsecured claims. Write that amount here.	6i.	\$ 85,839.40
	6j.	Total Nonpriority. Add lines 6f through 6i.	6j.	\$ 85,839.40

Official Form 106 E/F

	13(3,1111,111	1 1100 1 100 1		
mation to identify your	case:			
MaryLu O'Donne	II			
First Name	Middle Name	Last Name		
First Name	Middle Name	Last Name		
ankruptcy Court for the:	DISTRICT OF NEW JERSE	ΞΥ		
				☐ Check if this is an amended filing
	MaryLu O'Donne First Name	MaryLu O'Donnell  First Name Middle Name  First Name Middle Name	MaryLu O'Donnell  First Name Middle Name Last Name  First Name Middle Name Last Name	MaryLu O'Donnell  First Name Middle Name Last Name  First Name Middle Name Last Name

#### Official Form 106G

### **Schedule G: Executory Contracts and Unexpired Leases**

12/15

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. If more space is needed, copy the additional page, fill it out, number the entries, and attach it to this page. On the top of any additional pages, write your name and case number (if known).

- 1. Do you have any executory contracts or unexpired leases?
  - No. Check this box and file this form with the court with your other schedules. You have nothing else to report on this form.
  - Tyes. Fill in all of the information below even if the contacts of leases are listed on Schedule A/B:Property (Official Form 106 A/B).
- List separately each person or company with whom you have the contract or lease. Then state what each contract or lease is for (for example, rent, vehicle lease, cell phone). See the instructions for this form in the instruction booklet for more examples of executory contracts and unexpired leases.

	Person or	company wit	h whom you have the coer, Street, City, State and ZIP Co	contract or lease	State what the contract or lease is for
2.1					
	Name				_
	Number	Street			
	City		State	ZIP Code	
2.2					
	Name				
	Number	Street			_
	City		State	ZIP Code	<del>_</del>
2.3					
	Name				
	Number	Street			_
	City		State	ZIP Code	_
2.4				·	
	Name				_
	Number	Street			_
	City		State	ZIP Code	_
2.5					
	Name				
	Number	Street			_
	City		State	ZIP Code	<del>_</del>
	,		<b>-</b>	0000	

		Docume	nt Page 34 o	<u>f 71</u>
Fill in this	information to identify your c	ase:		
Debtor 1	MaryLu O'Donnell			
	First Name	Middle Name	Last Name	
Debtor 2 (Spouse if, filin	ng) First Name	Middle Name	Last Name	
United Stat	tes Bankruptcy Court for the:	DISTRICT OF NEW JEF	RSEY	
Case numb (if known)	per			☐ Check if this is an amended filing
	l Form 106H lule H: Your Code	ebtors		12/15
people are ill it out, ar our name	filing together, both are equa	Ily responsible for supp poxes on the left. Attach Answer every question	lying correct informati the Additional Page to	s complete and accurate as possible. If two married ion. If more space is needed, copy the Additional Page of this page. On the top of any Additional Pages, write as a codebtor.
	, ,	<b>3</b> ,	·	
■ No □ Yes				
	nin the last 8 years, have you a, California, Idaho, Louisiana, I			y? (Community property states and territories include ngton, and Wisconsin.)
	Go to line 3.  Did your spouse, former spouse.	se, or legal equivalent live	with you at the time?	
in line Form ′	2 again as a codebtor only if	that person is a guarant	tor or cosigner. Make s	if your spouse is filing with you. List the person shows sure you have listed the creditor on Schedule D (Officia 6G). Use Schedule D, Schedule E/F, or Schedule G to fi
	Column 1: Your codebtor Name, Number, Street, City, State and ZIP	Code		Column 2: The creditor to whom you owe the debt Check all schedules that apply:
3.1				☐ Schedule D, line
	Name			☐ Schedule E/F, line
				☐ Schedule G, line
	Number Street City	State	ZIP Code	_
3.2				☐ Schedule D, line
	Name			_ ☐ Schedule D, line
				☐ Schedule G, line
-	Number Street			_
	City	State	ZIP Code	

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						•				
	in this information to identify your obtor 1 MaryLu O'D									
	btor 2  puse, if filing)									
Uni	ited States Bankruptcy Court for the	e: DISTRICT OF NEW	JERSEY							
	se number nown)		-					ed filing ent showin	ng postpetition	
O	fficial Form 106I					_			ollowing date:	
	chedule I: Your Inc	ome				ŗ	MM / DD/ \	YYYY		12/15
sup spo atta	as complete and accurate as posiplying correct information. If you use. If you are separated and you ich a separate sheet to this form.  The describe Employment	i are married and not fili ur spouse is not filing w On the top of any additi	ng jointly, and your ith you, do not inclu	spouse de infor	is liv mati	ing with	you, incl t your sp	ude inforrouse. If m	mation about ore space is	your needed,
1.	Fill in your employment information.		Debtor 1				Debtor 2	2 or non-fi	iling spouse	
	If you have more than one job, attach a separate page with information about additional	Employment status	<ul><li>■ Employed</li><li>□ Not employed</li></ul>				☐ Empl	oyed employed		
	employers.	Occupation	admin asst							
	Include part-time, seasonal, or self-employed work.	Employer's name	Citibank							
	Occupation may include student or homemaker, if it applies.	Employer's address	Iselin, NJ 08830	)						
		How long employed t	here? 26 yrs				_			
Pai	rt 2: Give Details About Mo	nthly Income								
	imate monthly income as of the cuse unless you are separated.	late you file this form. If	you have nothing to r	eport for	any	line, writ	e \$0 in the	space. In	clude your noi	n-filing
	ou or your non-filing spouse have m e space, attach a separate sheet to		ombine the informatio	n for all	empl	oyers for	that perso	on on the li	ines below. If	you need
						For De	btor 1		btor 2 or ing spouse	
2.	List monthly gross wages, sala deductions). If not paid monthly,			2.	\$	7	7,018.22	\$	N/A	
3.	Estimate and list monthly over	time pay.		3.	+\$		0.00	+\$	N/A	
4.	Calculate gross Income. Add li	ne 2 + line 3.		4.	\$	7,0	18.22	\$	N/A	

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Deb	tor 1	MaryLu O'Donnell	-	C	case r	number ( <i>if kn</i>	own)				
					For	Debtor 1			or Debtor on-filing s		
	Сор	y line 4 here	4.		\$	7,018	3.22	\$	iii-iiiiig s	N/A	_
	-				· —	1,010		· -			_
5.	List	all payroll deductions:									
	5a.	Tax, Medicare, and Social Security deductions	5a.		\$	1,402		\$_		N/A	
	5b.	Mandatory contributions for retirement plans	5b.		\$		.00	\$_		N/A	_
	5c.	Voluntary contributions for retirement plans	5c.		\$		3.06	\$_		N/A	_
	5d. 5e.	Required repayments of retirement fund loans Insurance	5d. 5e.		\$ \$	760	.24	\$ \$		N/A N/A	_
	5f.	Domestic support obligations	5f.		\$ 		.00	Ψ_ \$		N/A	
	5g.	Union dues	5g.		\$		.00	\$		N/A	_
	5h.	Other deductions. Specify:	5h.		\$		.00	+ \$		N/A	_
6.	Add	the payroll deductions. Add lines 5a+5b+5c+5d+5e+5f+5g+5h.	6.		\$	2,885	5.87	\$		N/A	_
7.	Calo	culate total monthly take-home pay. Subtract line 6 from line 4.	7.		\$	4,132		\$		N/A	_
8.	List	all other income regularly received:						-			_
	8a.	Net income from rental property and from operating a business,									
		profession, or farm Attach a statement for each property and business showing gross									
		receipts, ordinary and necessary business expenses, and the total									
		monthly net income.	8a	١.	\$	0	.00	\$		N/A	
	8b.	Interest and dividends	8b.	).	\$	0	.00	\$		N/A	_
	8c.	Family support payments that you, a non-filing spouse, or a dependent regularly receive									
		Include alimony, spousal support, child support, maintenance, divorce	0-		Φ	705		Φ.			
	8d.	settlement, and property settlement.  Unemployment compensation	8c. 8d.		\$ \$		00.	\$ \$		N/A N/A	_
	8e.	Social Security	8e.		\$ _		0.00	\$ \$		N/A N/A	_
	8f.	Other government assistance that you regularly receive	00	•	Ψ			Ψ_		11//	_
		Include cash assistance and the value (if known) of any non-cash assistance	)								
		that you receive, such as food stamps (benefits under the Supplemental									
		Nutrition Assistance Program) or housing subsidies.  Specify:	8f.		\$	0	.00	\$		N/A	
	8g.	Pension or retirement income	8g.		<u>*</u> —		.00	\$	-	N/A	_
	8h.	Other monthly income. Specify: expected bonus	8h		\$		.00	+ \$		N/A	_
•							1				
9.	Add	l all other income. Add lines 8a+8b+8c+8d+8e+8f+8g+8h.	9.	\$		1,135	.00	\$_		N/A	A
40	0-1	and the manufacture and the transport of the second	40 E	Φ.			_				
10.			10.	\$_		5,267.35	+ \$		N/A	= \$_	5,267.35
		the entries in line 10 for Debtor 1 and Debtor 2 or non-filing spouse.	. L				L			l L	
11.		te all other regular contributions to the expenses that you list in <i>Schedule</i> ude contributions from an unmarried partner, members of your household, your		ande	nte	vour room	mata	s and	4		
		er friends or relatives.	асрс	JIIGC	,,,,	your room	mate	3, and	•		
	Do r	not include any amounts already included in lines 2-10 or amounts that are not	availa	able	to p	ay expense	es lis	ed in	Schedule	e <i>J</i> .	
	Spe	cify:							11.	+\$	0.00
12	Δdd	I the amount in the last column of line 10 to the amount in line 11. The res	ult ic	the	com	hined mon	thly i	acom	Δ.		
12.		e that amount on the Summary of Schedules and Statistical Summary of Certai									
	appl	lies						,	12.	\$	5,267.35
										Combi	ned
4.0	_		_							month	ly income
13.	י סט	you expect an increase or decrease within the year after you file this form	?								
		No. Yes Explain:									
		THE EXHIBIT I									

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	in Alain infama	tion to identify yo				1			
		tion to identify yo	our case:						
Deb	tor 1	MaryLu O'Do	nnell				eck if this is:	filio	
Deb	tor 2						An amended A supplement	illing at showing postpetition cha	anter
	ouse, if filing)							as of the following date:	артог
Unit	ed States Bankr	uptcy Court for the	: DISTRI	CT OF NEW JERSEY			MM / DD / Y	YYY	
Cas	e number								
	nown)								
Of	fficial Fo	rm 106J				•			
			 Evnor	1000					4045
		J: Your I			ara filing tagathar h	oth are as	ually rachana	ible for supplying correc	12/15
info	ormation. If m		eded, atta	ch another sheet to th				vrite your name and cas	
Par	t 1: Descr	ibe Your House	hold						
1.	Is this a joir								
	■ No. Go to	o line 2. s Debtor 2 live i	in a senar	ata housahold?					
	□ res. <b>Doe</b>		ii a sepai	ate nousenoia:					
			st file Offici	al Form 106J-2, <i>Expens</i>	ses for Separate House	ehold of De	ebtor 2.		
2.	Do you have	e dependents?	□ No						
	Do not list Do Debtor 2.	ebtor 1 and	■ Yes.	Fill out this information for each dependent			Depender age	Does dependent live with you?	ı
	Do not state	the						□ No	
	dependents				Daughter		19	■ Yes	
								□ No	
					-			Pyes	
								□ No	
								Pyes	
								□ No	
3.	Do your ove	enses include	_					Pes	
Э.		f people other th	han	No					
	yourself and	d your depende	nts? ⊔	Yes					
Par	t 2: Estim	ate Your Ongoir	na Month	v Expenses					
Est exp	imate your ex	penses as of yo	our bankr	uptcy filing date unless				a Chapter 13 case to rep top of the form and fill i	
• •									
				government assistanc cluded it on <i>Schedule I</i>					
(Off	ficial Form 10	<b>161.</b> )					You	r expenses	
4.		or home owners		ses for your residence r lot.	. Include first mortgag	e 4.	\$	1,660.89	
	If not includ	led in line 4:							
	4a. Real e	estate taxes				4a.	\$	0.00	
	4b. Prope	rty, homeowner's	s, or renter	's insurance		4b.	\$	0.00	
				ıpkeep expenses		4c.		250.00	
_		owner's associat			hana a seedeed	4d.	·	0.00	
ວ.	Additional r	nortgage bavme	ants for vo	our residence, such as	nome equity loans	5.	JD.	201 66	

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ebtor 1 MaryLu O'Donnell	Case number (if known)	
Utilities:		
6a. Electricity, heat, natural gas	6a. \$	325.00
6b. Water, sewer, garbage collection	6b. \$	105.00
6c. Telephone, cell phone, Internet, satellite, and cable services	6c. \$	265.00
6d. Other. Specify:	6d. \$	0.00
Food and housekeeping supplies	7. \$	650.00
Childcare and children's education costs	8. \$	0.00
Clothing, laundry, and dry cleaning	9. \$	200.00
). Personal care products and services	10. \$	80.00
. Medical and dental expenses	11. \$	150.00
Transportation. Include gas, maintenance, bus or train fare.	Π. Ψ	150.00
Do not include car payments.	12. \$	275.00
Entertainment, clubs, recreation, newspapers, magazines, and books	13. \$	100.00
Charitable contributions and religious donations	14. \$	90.00
Insurance.	· · · · · · · · · · · · · · · · · · ·	00.00
Do not include insurance deducted from your pay or included in lines 4 or 20.		
15a. Life insurance	15a. \$	153.00
15b. Health insurance	15b. \$	0.00
15c. Vehicle insurance	15c. \$	216.00
15d. Other insurance. Specify:	15d. \$	0.00
Taxes. Do not include taxes deducted from your pay or included in lines 4 or 20.		0.00
Specify:	16. \$	0.00
Installment or lease payments:	<del></del>	
17a. Car payments for Vehicle 1	17a. \$	230.00
17b. Car payments for Vehicle 2	17b. \$	0.00
17c. Other. Specify:	17c. \$	0.00
17d. Other. Specify:	17d. \$	0.00
Your payments of alimony, maintenance, and support that you did not report a	is	
deducted from your pay on line 5, Schedule I, Your Income (Official Form 106I)		0.00
Other payments you make to support others who do not live with you.	\$	0.00
Specify:	19.	
Other real property expenses not included in lines 4 or 5 of this form or on Sci	nedule I: Your Income.	
20a. Mortgages on other property	20a. \$	0.00
20b. Real estate taxes	20b. \$	0.00
20c. Property, homeowner's, or renter's insurance	20c. \$	0.00
20d. Maintenance, repair, and upkeep expenses	20d. \$	0.00
20e. Homeowner's association or condominium dues	20e. \$	0.00
Other: Specify: pet/vet expense	21. +\$	40.00
Calculate your monthly expenses	•	4 004 55
22a. Add lines 4 through 21.	\$	4,991.55
22b. Copy line 22 (monthly expenses for Debtor 2), if any, from Official Form 106J-2		
22c. Add line 22a and 22b. The result is your monthly expenses.	\$	4,991.55
Calculate your monthly net income.		
23a. Copy line 12 (your combined monthly income) from Schedule I.	23a. \$	5,267.35
23b. Copy your monthly expenses from line 22c above.	23b\$	4,991.55
200. Copy your morning expended from the 220 above.	Σου. Ψ	4,331.33
23c. Subtract your monthly expenses from your monthly income.		<b>-</b>
The result is your <i>monthly net income</i> .	23c. \$	275.80
	<del></del>	
Do you expect an increase or decrease in your expenses within the year after		
For example, do you expect to finish paying for your car loan within the year or do you expect yo	ur mortgage payment to increa	ise or decrease because o
modification to the terms of your mortgage?		
■ No.		
Tyes Explain here:		

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Fill in this inform	nation to identify your	case:			
Debtor 1	MaryLu O'Donne	I			
	First Name	Middle Name	Last Name		
Debtor 2 (Spouse if, filing)	First Name	Middle Name	Last Name		
United States Ba	nkruptcy Court for the:	DISTRICT OF NEW JERSEY			
Case number _					Check if this is an
				_	amended filing
Official Forn  Declarat		n Individual De	btor's Schedu	ıles	12/15
f two married pe	ople are filing togethe	r, both are equally responsible	for supplying correct infor	mation.	
obtaining money	s form whenever you fi or property by fraud in 3 U.S.C. §§ 152, 1341, 1	le bankruptcy schedules or am n connection with a bankruptcy 519, and 3571.	ended schedules. Making a case can result in fines up	a false statement, con o to \$250,000, or impri	cealing property, or sonment for up to 20
Sigr	n Below				
Did you pay	y or agree to pay some	one who is NOT an attorney to	help you fill out bankruptc	y forms?	
■ No					
☐ Yes. N	lame of person			Attach Bankruptcy Peti Declaration, and Signa	ition Preparer's Notice, ture (Official Form 119)
	ity of perjury, I declare true and correct.	that I have read the summary a	nd schedules filed with thi	s declaration and	
X /s/ Mar	yLu O'Donnell		X		
MaryLu	u O'Donnell e of Debtor 1		Signature of Debtor 2		
Date 1	1/27/2018		Date		

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Fill	l in this inform	nation to identify you	r case:			
_	btor 1					
De	DIOI I	MaryLu O'Donne First Name	Middle Name	Last Name		
	btor 2 buse if, filing)	First Name	Middle Name	Last Name		
Un	ited States Bar	nkruptcy Court for the:	DISTRICT OF NEW JER	SEY		
	se number				_	Check if this is an mended filing
St Be	as complete a	of Financial	attach a separate sheet to	are filing together, both are	ankruptcy equally responsible for sup additional pages, write you	
Pa	rt 1: Give D	etails About Your Ma	nrital Status and Where You	Lived Before		
1.	What is your	current marital statu	ıs?			
	<ul><li>☐ Married</li><li>■ Not mar</li></ul>	ried				
2.	During the la	ast 3 years, have you	lived anywhere other than	where you live now?		
	■ No □ Yes. Lis	t all of the places you l	ived in the last 3 years. Do no	ot include where you live now	'.	
	Debtor 1 Pr	ior Address:	Dates Debtor 1 lived there	Debtor 2 Prior Ad	dress:	Dates Debtor 2 lived there
<b>3.</b> stat					ity property state or territory co, Texas, Washington and W	
	■ No □ Yes. Ma	ke sure you fill out <i>Scl</i>	nedule H: Your Codebtors (O	fficial Form 106H).		
Pa	rt 2 Explai	n the Sources of You	r Income			
4.	Fill in the tota	I amount of income yo	nployment or from operatin u received from all jobs and a have income that you receive	all businesses, including part-		ndar years?
	□ No ■ Yes. Fill	in the details.				
			Debtor 1		Debtor 2	
			Sources of income Check all that apply.	Gross income (before deductions and exclusions)	Sources of income Check all that apply.	Gross income (before deductions and exclusions)
		of current year until d for bankruptcy:	■ Wages, commissions, bonuses, tips	\$74,090.00	☐ Wages, commissions, bonuses, tips	
			☐ Operating a business		☐ Operating a business	

Official Form 107

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Debtor 1 MaryLu O'Donnell

			Debtor 1		Debtor 2	
			Sources of income Check all that apply.	Gross income (before deductions and exclusions)	Sources of income Check all that apply.	Gross income (before deductions and exclusions)
For last cale (January 1 to		31, 2017 )	■ Wages, commissions, bonuses, tips	\$85,235.00	☐ Wages, commissions, bonuses, tips	
			☐ Operating a business		☐ Operating a business	
For the caler (January 1 to			■ Wages, commissions, bonuses, tips	\$73,785.00	☐ Wages, commissions, bonuses, tips	
			☐ Operating a business		☐ Operating a business	
and other winnings. List each □ No	r public benef . If you are fili	iit payments; ng a joint cas he gross inco	pensions; rental income; inte e and you have income that	amples of other income are a rest; dividends; money collect you received together, list it outlety. Do not include income the	ted from lawsuits; royalties; ar nly once under Debtor 1.	
			Debtor 1		Debtor 2	
			Sources of income Describe below.	Gross income from each source (before deductions and exclusions)	Sources of income Describe below.	Gross income (before deductions and exclusions)
For last cale (January 1 to		31, 2017 )	pension liquidation	\$6,348.00		
For the caler (January 1 to			pension liquidation	\$8,133.00		
			2016-18: Debtor received child support benefits	\$0.00		
Part 3: Lis	st Cortain Pa	vments Vou	Made Before You Filed for	Bankruptev		
		•	's debts primarily consume	1 /		
□ No.	Neither De	ebtor 1 nor D		umer debts. Consumer debts	are defined in 11 U.S.C. § 10	01(8) as "incurred by an
		•		id you pay any creditor a total	of \$6,425* or more?	
	□ <sub>No.</sub> □ <sub>Yes</sub>	Go to line 7		:-  - +-+-  -{		th a tatal amazonat
		paid that cre not include	editor. Do not include paymer payments to an attorney for t		ations, such as child support	and alimony. Also, do
<b>.</b>	,	•	, ,	rs after that for cases filed on	or after the date of adjustmen	t.
■ Yes			r both have primarily consure you filed for bankruptcy, d	umer debts. id you pay any creditor a total	of \$600 or more?	
	□ <sub>No.</sub>	Go to line 7				
	■ Yes	List below e include pay	each creditor to whom you pa	id a total of \$600 or more and bligations, such as child supp		

**Creditor's Name and Address** 

Dates of payment

**Total amount** paid Amount you still owe

Was this payment for ...

Statement of Financial Affairs for Individuals Filing for Bankruptcy

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Case number (if known) Document

Debtor 1 MaryLu O'Donnell

	Creditor's Name and Address	Dates of payment	Total amount paid	Amount you still owe	Was this payment for
	secured creditors paid monthly as due	monthly	Unknown	Unknown	■ Mortgage ■ Car □ Credit Card □ Loan Repayment □ Suppliers or vendors □ Other
7.	Within 1 year before you filed for bankrupto Insiders include your relatives; any general pa of which you are an officer, director, person in a business you operate as a sole proprietor. 1 alimony.	rtners; relatives of any ger control, or owner of 20% of	neral partners; partner or more of their votin	erships of which yo g securities; and ar	u are a general partner; corporations ny managing agent, including one for
	☐ Yes. List all payments to an insider.				
	Insider's Name and Address	Dates of payment	Total amount paid	Amount you still owe	Reason for this payment
8.	Within 1 year before you filed for bankrupto insider? Include payments on debts guaranteed or cos  ■ No □ Yes. List all payments to an insider				
	Insider's Name and Address	Dates of payment	Total amount	Amount you	Reason for this payment
			paid	still owe	Include creditor's name
<b>Pa</b> 1	Within 1 year before you filed for bankrupto List all such matters, including personal injury modifications, and contract disputes.	cy, were you a party in ar			
	□ No				
	Yes. Fill in the details.				
	Case title Case number	Nature of the case	Court or agency		Status of the case
	Capital One Bank v. Marylu ODonnell DC-009699-18	Civil	Superior Court Law Division-S Middlesex Cou New Brunswic	Special Civil Inty	■ Pending □ On appeal □ Concluded
	Synchrony Bank v. Marylu ODonnell DC-001349-18	Civil	Superior Court Law Division-S Middlesex Cou New Brunswic	Special Civil Inty	■ Pending □ On appeal □ Concluded
	Synchrony Bank v. Marylu ODonnell DC-001713-18	Civil	Superior Court Law Division-S Middlesex Cou New Brunswic	Special Civil Inty	■ Pending □ On appeal □ Concluded
	Citibank, NA v. Marylu ODonnell DC-003289-18	Civil	Superior Court Law Division-S Middlesex Cou New Brunswic	Special Civil Inty	■ Pending □ On appeal □ Concluded

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Case number (if known) Document

Debtor 1 MaryLu O'Donnell

	Case title Case number	Nature of the case	Court or agency	S	tatus of the ca	ase
	Citibank, NA v. Marylu ODonnell DC-007328-18	Civil	Superior Court of NJ Law Division-Special Civ Middlesex County New Brunswick, NJ 0890	vil [	Pending On appeal Concluded	
10.	Within 1 year before you filed for bankrupto Check all that apply and fill in the details below		erty repossessed, foreclosed,	garnished	d, attached, se	eized, or levied?
	<ul><li>No. Go to line 11.</li><li>Yes. Fill in the information below.</li></ul>					
	Creditor Name and Address	Describe the Property		Date		Value of the property
		Explain what happened				
	Walmart/Synchrony Bank PO Box 965024	bank account		11/5/18		\$275.76
	Orlando, FL 32896	☐ Property was reposse				
		☐ Property was foreclos				
		☐ Property was garnish	ed.			
		Property was attached	d, seized or levied.			
	Best Buy/Citibank PO Box 15298	wages		pending	3	Unknown
	Wilmington, DE 19850-5298	☐ Property was reposse☐ Property was foreclos				
		■ Property was garnish				
		☐ Property was attached				
11.	Within 90 days before you filed for bankrup accounts or refuse to make a payment becomes No Yes. Fill in the details.  Creditor Name and Address		_	titution, se	·	unts from your Amount
				taken		
12.	Within 1 year before you filed for bankrupto court-appointed receiver, a custodian, or a No ☐ Yes		erty in the possession of an a	ssignee fo	r the benefit o	of creditors, a
Pai	t 5: List Certain Gifts and Contributions					
13.	Within 2 years before you filed for bankrup  ■ No □ Yes. Fill in the details for each gift.	tcy, did you give any gifts	s with a total value of more th	an \$600 po	er person?	
	Gifts with a total value of more than \$600	Describe the gifts		Dates yo	u gave	Value
	per person	2000.130 1110 91110		the gifts		valuo
	Person to Whom You Gave the Gift and Address:					
14.	Within 2 years before you filed for bankrup  ☐ No  Yes. Fill in the details for each gift or con		s or contributions with a total	value of n	nore than \$60	0 to any charity?
	Gifts or contributions to charities that total more than \$600 Charity's Name		u contributed	Dates yo contribut		Value
	Address (Number, Street, City, State and ZIP Code)					
Offic	al Form 107 Staten	ent of Financial Affairs for I	ndividuals Filing for Bankruptcy			page 4

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Debtor 1 MaryLu O'Donnell

	Gifts or contributions to charities that total more than \$600 Charity's Name Address (Number, Street, City, State and ZIP Code)		Describe what you contributed	Dates you contributed	Value	
	Amer Foundation for Suicide Prevention		various monetary contributions made	various	Unknown	
Pai	rt 6: List Certain Losses					
15.	Within 1 year before you filed for bankru or gambling?	ıptcy or	since you filed for bankruptcy, did you lose any	thing because of thef	t, fire, other disaster	
	■ No □ Yes. Fill in the details.					
	Describe the property you lost and how the loss occurred	Include	be any insurance coverage for the loss the amount that insurance has paid. List pending noe claims on line 33 of Schedule A/B: Property.	Date of your loss	Value of property lost	
Par	tt 7: List Certain Payments or Transfer	s				
16.	consulted about seeking bankruptcy or	preparii	id you or anyone else acting on your behalf paying a bankruptcy petition? s, or credit counseling agencies for services require	,, ,	ty to anyone you	
	Yes. Fill in the details.					
	Person Who Was Paid Address Email or website address Person Who Made the Payment, if Not	<b>You</b>	Description and value of any property transferred	Date payment or transfer was made	Amount of payment	
	Warren Brumel, Esq. 65 Main Street PO Box 181 Keyport, NJ 07735 www.keyportlaw.com		attorney fees	10/16/18	\$1,250.00	
	Debt Education and Certification Foundat 112 Goliad St Fort Worth, TX 76126 www.bkcert.com		pre-bankruptcy credit counseling	October 23, 2018	\$15.00	
	Anchor Law Firm 609 SW 8th St Ste 600 Bentonville, AR 72712 anchorlawfirm.com		\$929/month debt management plan	monthly 5/2017 - 8/2018	\$16,722.00	
17.	Within 1 year before you filed for bankru promised to help you deal with your cre Do not include any payment or transfer tha	ditors o		or transfer any proper	ty to anyone who	
	■ No					
	Yes. Fill in the details.		Decembring and value of any managers	Data may	A	
	Person Who Was Paid Address		Description and value of any property transferred	Date payment or transfer was made	Amount of payment	

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Debtor 1 MaryLu O'Donnell

18.	Within 2 years before you filed for bankruptcy, did you sell, trade, or otherwise transfer any property to anyone, other than property transferred in the ordinary course of your business or financial affairs?  Include both outright transfers and transfers made as security (such as the granting of a security interest or mortgage on your property). Do not include gifts and transfers that you have already listed on this statement.  No						
	☐ Yes. Fill in the details.						
	Person Who Received Transfer Address	Description and v property transferr		payme	be any property or ents received or debts n exchange	Date transfer was made	
	Person's relationship to you						
19.	beneficiary? (These are often called asset-prote		y property to a	self-settled	d trust or similar device	of which you are a	
	Yes. Fill in the details.						
	Name of trust	Description and v	alue of the pro	perty trans	ferred	Date Transfer was made	
						maac	
Pai	rt 8: List of Certain Financial Accounts, Inst	ruments, Safe Deposit	Boxes, and St	orage Units	S		
20.	Within 1 year before you filed for bankruptcy,	, were any financial ac	counts or instr	uments hel	d in your name, or for y	our benefit, closed,	
	sold, moved, or transferred? Include checking, savings, money market, or houses, pension funds, cooperatives, associated				; shares in banks, credi	t unions, brokerage	
	No						
	Yes. Fill in the details.	4	T (		D-1	1 4 b -1	
		Last 4 digits of account number	Type of according trument	unt or	Date account was closed, sold, moved, or transferred	Last balance before closing or transfer	
21.	Do you now have, or did you have within 1 ye cash, or other valuables?	ear before you filed for	bankruptcy, aı	ny safe dep	osit box or other depos	itory for securities,	
	■ No □ Yes. Fill in the details.						
	Name of Financial Institution Address (Number, Street, City, State and ZIP Code)	Who else had acc Address (Number, State and ZIP Code)		Describe t	the contents	Do you still have it?	
22.	Have you stored property in a storage unit or	place other than your	home within 1	year before	e you filed for bankrupt	cy?	
	■ No □ Yes. Fill in the details.						
	Name of Storage Facility Address (Number, Street, City, State and ZIP Code)	Who else has or h to it? Address (Number, State and ZIP Code)		Describe t	the contents	Do you still have it?	
Par	rt 9: Identify Property You Hold or Control fo	or Someone Fise					
23.			ude any proper	ty you borr	owed from, are storing	for, or hold in trust	
	■ No □ Yes. Fill in the details.						
	Owner's Name Address (Number, Street, City, State and ZIP Code)	Where is the prop (Number, Street, City, S Code)		Describe t	the property	Value	
_	Ohn Datalla Abrilla II	,					
Par	rt 10: Give Details About Environmental Infor	mation					
For	the purpose of Part 10, the following definition	ns apply:					

Environmental law means any federal, state, or local statute or regulation concerning pollution, contamination, releases of hazardous or Official Form 107

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Debtor 1 MaryLu O'Donnell

toxic substances, wastes, or material into the air, land, soil, surface water, groundwater, or other medium, including statutes or regulations controlling the cleanup of these substances, wastes, or material.

- Site means any location, facility, or property as defined under any environmental law, whether you now own, operate, or utilize it or used to own, operate, or utilize it, including disposal sites.
- Hazardous material means anything an environmental law defines as a hazardous waste, hazardous substance, toxic substance,

	nazardous material, pollutant, contaminant, or similar term.						
Rep	ort all r	notices, releases, and proceedings that	at you know about, regardless of whe	en the	ey occurred.		
24.	. Has any governmental unit notified you that you may be liable or potentially liable under or in violation of an environmental law?						
	■ N	o es. Fill in the details.					
		e of site PSS (Number, Street, City, State and ZIP Code)	Governmental unit Address (Number, Street, City, State a ZIP Code)	nd	Environmental law, if you know it	Date of notice	
25.	Have y	ou notified any governmental unit of	any release of hazardous material?				
	■ N	o es. Fill in the details.					
		e of site PSS (Number, Street, City, State and ZIP Code)	Governmental unit Address (Number, Street, City, State a ZIP Code)	nd	Environmental law, if you know it	Date of notice	
26.	Have y	ou been a party in any judicial or adn	ninistrative proceeding under any en	vironi	mental law? Include settlements a	and orders.	
	■ N	o es. Fill in the details.					
	Case Case	Title Number	Court or agency Name Address (Number, Street, City, State and ZIP Code)	Na	ture of the case	Status of the case	
Par	t 11:	Give Details About Your Business or	Connections to Any Business				
27.	Within	4 years before you filed for bankrupt	cy, did you own a business or have a	ıny of	the following connections to any	business?	
		A sole proprietor or self-employed in	n a trade, profession, or other activity	y, eith	er full-time or part-time		
		A member of a limited liability comp	any (LLC) or limited liability partners	hip (L	LLP)		
		A partner in a partnership					
		An officer, director, or managing ex	ecutive of a corporation				
		An owner of at least 5% of the voting	g or equity securities of a corporation	n			
	<b>■</b> N	o. None of the above applies. Go to F	Part 12.				
	□ Y	es. Check all that apply above and fill	in the details below for each busines	ss.			
	Busir Addre	ness Name	Describe the nature of the business	3	Employer Identification number Do not include Social Security I		
		er, Street, City, State and ZIP Code)	Name of accountant or bookkeeper		Dates business existed		
28.		2 years before you filed for bankrupt tions, creditors, or other parties.	cy, did you give a financial statement	t to ar		ide all financial	
	■ N	o es. Fill in the details below.					
	Name Addre		Date Issued				
_							

Part 12: Sign Below

I have read the answers on this Statement of Financial Affairs and any attachments, and I declare under penalty of perjury that the answers Statement of Financial Affairs for Individuals Filing for Bankruptcy Official Form 107 page 7 Case 18-33988-MBK Doc 1 Filed 12/05/18 Entered 12/05/18 16:11:50 Desc Main Page 47 of 71
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Debtor 1 MaryLu O'Donnell

are true and correct. I understand that making a false statement, concealing property, or obtaining money or property by fraud in connection with a bankruptcy case can result in fines up to \$250,000, or imprisonment for up to 20 years, or both. 18 U.S.C. §§ 152, 1341, 1519, and 3571. /s/ MaryLu O'Donnell Signature of Debtor 2 MaryLu O'Donnell Signature of Debtor 1 Date 11/27/2018 Date Did you attach additional pages to Your Statement of Financial Affairs for Individuals Filing for Bankruptcy (Official Form 107)? ■ No ☐ Yes Did you pay or agree to pay someone who is not an attorney to help you fill out bankruptcy forms?

☐ Yes. Name of Person . Attach the Bankruptcy Petition Preparer's Notice, Declaration, and Signature (Official Form 119).

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Fill in this inform	nation to identify your case:
Debtor 1	MaryLu O'Donnell
Debtor 2 (Spouse, if filing)	
United States B	ankruptcy Court for the: District of New Jersey
Case number (if known)	

Check as directed in lines 17 and 21:
According to the calculations required by this Statement:
☐ 1. Disposable income is not determined under 11 U.S.C. § 1325(b)(3).
<ul> <li>2. Disposable income is determined under 11 U.S.C. § 1325(b)(3).</li> </ul>
☐ 3. The commitment period is 3 years.
4. The commitment period is 5 years.
☐ Check if this is an amended filing

#### Official Form 122C-1

# **Chapter 13 Statement of Your Current Monthly Income and Calculation of Commitment Period**

12/15

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for being accurate. If more space is needed, attach a separate sheet to this form. Include the line number to which the additional information applies. On the top of any additional pages, write your name and case number (if known).

Par	1: Calculate Your Average Monthly Income							
1.	What is your marital and filing status? Check one of	nly.						
	■ Not married. Fill out Column A, lines 2-11.							
	☐ Married. Fill out both Columns A and B, lines 2-11							
10 th	Il in the average monthly income that you received from al 01(10A). For example, if you are filing on September 15, the 6- e 6 months, add the income for all 6 months and divide the total couses own the same rental property, put the income from that	month perio al by 6. Fill i	d would n the re	be March 1 throusult. Do not includ	igh August 31. If the any income am	ne amount of yount more than	our monthly incom n once. For examp	e varied during le, if both
					Column A Debtor 1	Debt	mn B tor 2 or filing spouse	
2.	Your gross wages, salary, tips, bonuses, overtime payroll deductions).	, and com	missio	ons (before all	\$	.22 \$		
3.	<b>Alimony and maintenance payments.</b> Do not include Column B is filled in.	e payment	s from	a spouse if	\$0	.00 \$		
4.	All amounts from any source which are regularly p of you or your dependents, including child suppor from an unmarried partner, members of your househo and roommates. Do not include payments from a spot you listed on line 3.	<b>t.</b> Include I	regular pende	contributions nts, parents,	\$736	.00_ \$		
5.	Net income from operating a business, profession, or farm	Debtor 1						
	Gross receipts (before all deductions)	\$	0.00					
	Ordinary and necessary operating expenses	-\$	0.00					
	Net monthly income from a business, profession, or fa	rm \$	0.00	Copy here ->	\$0	.00 \$		
6.	Net income from rental and other real property	Debtor 1						
	Gross receipts (before all deductions)	\$	0.00					
	Ordinary and necessary operating expenses	<b>-</b> \$	0.00					
	Net monthly income from rental or other real property	\$	0.00	Copy here ->	s 0	.00 \$		

Official Form 122C-1 Chapter 13 Statement of Your Current Monthly Income and Calculation of Commitment Period

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Case number (if known)

Column A Column B Debtor 1 Debtor 2 or non-filing spouse 0.00 7. Interest, dividends, and royalties 8. Unemployment compensation 0.00 Do not enter the amount if you contend that the amount received was a benefit under the Social Security Act. Instead, list it here: For you For your spouse 9. Pension or retirement income. Do not include any amount received that was a 0.00 benefit under the Social Security Act. 10. Income from all other sources not listed above. Specify the source and amount. Do not include any benefits received under the Social Security Act or payments received as a victim of a war crime, a crime against humanity, or international or domestic terrorism. If necessary, list other sources on a separate page and put the total below. 0.00 0.00 Total amounts from separate pages, if any. \$ 0.00 11. Calculate your total average monthly income. Add lines 2 through 10 for 7,754.22 7.754.22 \$ each column. Then add the total for Column A to the total for Column B. Total average monthly income **Determine How to Measure Your Deductions from Income** Part 2: 12. Copy your total average monthly income from line 11. 7,754.22 13. Calculate the marital adjustment. Check one: You are not married. Fill in 0 below. You are married and your spouse is filing with you. Fill in 0 below. ☐ You are married and your spouse is not filing with you. Fill in the amount of the income listed in line 11, Column B, that was NOT regularly paid for the household expenses of you or your dependents, such as payment of the spouse's tax liability or the spouse's support of someone other than you or your dependents. Below, specify the basis for excluding this income and the amount of income devoted to each purpose. If necessary, list additional adjustments on a separate page. If this adjustment does not apply, enter 0 below. Total 0.00 0.00 Copy here=> 7,754.22 14. Your current monthly income. Subtract line 13 from line 12. 15. Calculate your current monthly income for the year. Follow these steps: 7,754.22 15a. Copy line 14 here=> Multiply line 15a by 12 (the number of months in a year). **x** 12 93,050.64 15b. The result is your current monthly income for the year for this part of the form.

MaryLu O'Donnell

Debtor 1

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Debt	or 1	Mar	yLu O'Donnell		Case number (if known)		
16	. Cal	ulate	the median family income that applies to y	ou. Follow the	ese steps:		
	16a	Fill in	the state in which you live.	NJ			
	16b	Fill in	the number of people in your household.	2			
			the median family income for your state and		old	¢	80,302.00
		To fir	nd a list of applicable median income amounts actions for this form. This list may also be avai	s, go online usi	ng the link specified in the separate	Ψ_	
17		_	he lines compare?				
	17a		11 U.S.C. § 1325(b)(3). <b>Go to Part 3.</b> Do N	OT fill out Cal	age 1 of this form, check box 1, <i>Disposable inculation of Your Disposable Income</i> (Official F	orm 122C-2	2).
	17b	•	Line 15b is more than line 16c. On the top 1325(b)(3). <b>Go to Part 3 and fill out Calcu</b> your current monthly income from line 14 a	lation of You	is form, check box 2, <i>Disposable income is de</i> r Disposable Income (Official Form 122C-2)	termined un ). On line 3:	nder 11 U.S.C. § 9 of that form, copy
Par	t 3:	Ca	Iculate Your Commitment Period Under 11	U.S.C. § 1325	(b)(4)		
18.	Cop	y you	r total average monthly income from line 1	1		\$	7,754.22
19.	con	end th	ne marital adjustment if it applies. If you are not calculating the commitment period under 1 ncome, copy the amount from line 13.	married, your 1 U.S.C. § 132	spouse is not filing with you, and you 5(b)(4) allows you to deduct part of your		
	19a	If the	marital adjustment does not apply, fill in 0 on	line 19a.		-\$	0.00
	19b	Subt	ract line 19a from line 18.			\$	7,754.22
20.	Cal	ulate	your current monthly income for the year.	Follow these	steps:		
	20a	Сору	line 19b			\$_	7,754.22
		Multi	ply by 12 (the number of months in a year).			,	<b>(</b> 12
							- · <u>-</u>
	20b	The	result is your current monthly income for the y	ear for this par	t of the form	\$	93,050.64
	20c	Сору	the median family income for your state and	size of househ	old from line 16c	\$	80,302.00
	21.	How	do the lines compare?				
			Line 20b is less than line 20c. Unless otherwiperiod is 3 years. Go to Part 4.	se ordered by	the court, on the top of page 1 of this form, ch	eck box 3,	The commitment
			Line 20b is more than or equal to line 20c. Un commitment period is 5 years. Go to Part 4.	less otherwise	ordered by the court, on the top of page 1 of	this form, c	heck box 4, The
Par	t 4:	Siç	ın Below				
	By s	igning	g here, under penalty of perjury I declare that t	he information	on this statement and in any attachments is to	rue and cor	rect.
)	( /s/	Mary	/Lu O'Donnell				
•	Ma	ıryLu	O'Donnell				
	`		e of Debtor 1				
	Date		<b>27/2018</b> // DD / YYYY				
	If yo		cked 17a, do NOT fill out or file Form 122C-2.				
	If yo	u che	cked 17b, fill out Form 122C-2 and file it with t	his form. On li	ne 39 of that form, copy your current monthly i	income fron	n line 14 above.

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Fill in	this info	rmation t	to ide	ntify yo	ur case	1														
Debto	r 1	MaryLı	ı O'D	onnell																
Dobto	r O																			
Debto	r∠ se, if filin	g)																		
\ \	•	0,	_		D:															
United	States I	Bankruptcy	/ Cour	t for the	: Distri	ct of Ne	w Jersey	у												
	number													Choo	uk if th	ic ic c	an ame	ndod	filing	
(if kno	wn)													Chec	KII UI	15 15 6	an ame	nueu	illing	
Officia	l Form 1	22C-2																		
		13 Ca	ılcu	latio	on of	You	ır Dis	spos	sabl	e In	ncor	ne								04/16
Comm Be as o	itment F complete is neede	form, you Period (Off e and acc ed, attach	icial I urate a sep	orm 12 as pos arate s	22C-1). sible. If t heet to t	wo mar	rried ped	ople ard	e filing	toget	ther, b	oth are	equally	y resp	onsib	le for	being a	accura	ıte. If r	more
additio	nal pag	es, write y	our n	ame an	d case r	number	(if knov	vn).												
Part 1	: Ca	Iculate Yo	our De	ductio	ns from	Your In	come													
Dec exp 122 If you	question funct the enses if C-1, and our experie: Line n	I Revenue ns in lines may also expense are they are hid do not de nses differ umbers 1-	mount igher t educt a from 1	To find railable is set out than the any amount to month to	d the IRS at the but in lines standard bunts that o month,	6-15 reds. Do not you su	ards, go ards, go gardless not includ abtracted ne averaç nese num	o online k's office s of your de any of from ye ge expenders ap	e using ce.  r actual pperatir our sports course.	the li l expe ng exp puse's	ense. In penses income	ecified I later pathat you e in line	in the s arts of the u subtra e 13 of F	he forr acted fi Form 1	n, you rom in 22C-1	will us come	ons for se some in lines	e of you 5 and 0	orm. T ur actu 6 of Fo	<b>'his</b> ual
5.	The nu	mber of p	eople	used i	n detern	nining y	our ded	duction	s from	incor	me									
	plus the	ne number e number onber of pe	of any	additior	nal deper	ndents v											2			
Nat	ional St	andards		You r	nust use	the IRS	Nationa	al Stand	lards to	answ	ver the	questio	ns in lin	es 6-7	<b>'.</b>					
6.		<b>clothing,</b> and the rds, fill in t								ntered	I in line	5 and t	he IRS	Nation	nal		\$		1,20	02.00
7.	the doll people	pocket he ar amount who are 6 than this If	for ou 5 or o	it-of-poo derbe	cket heal cause ol	th care. der peo	The nun ple have	mber of a high	people er IRS a	is spl allowa	lit into t ance fo	two cate	egories-	-peopl	e who	are ur	nder 65	and		

Official Form 122C-2

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Document Page 52 of 71 MaryLu O'Donnell Debtor 1 Case number (if known) People who are under 65 years of age 7a. Out-of-pocket health care allowance per person 7b. Number of people who are under 65 2 7c. Subtotal. Multiply line 7a by line 7b. 104.00 Copy here=> 104.00 People who are 65 years of age or older 7d. Out-of-pocket health care allowance per person 114 7e. Number of people who are 65 or older 0 7f. Subtotal. Multiply line 7d by line 7e. 0.00 0.00 Copy here=> 7g. **Total.** Add line 7c and line 7f 104.00 Copy total here=: 104.00 Local Standards You must use the IRS Local Standards to answer the questions in lines 8-15. Based on information from the IRS, the U.S. Trustee Program has divided the IRS Local Standard for housing for bankruptcy purposes into two parts: Housing and utilities - Insurance and operating expenses Housing and utilities - Mortgage or rent expenses To answer the questions in lines 8-9, use the U.S. Trustee Program chart. To find the chart, go online using the link specified in the separate instructions for this form. This chart may also be available at the bankruptcy clerk's office. Housing and utilities - Insurance and operating expenses: Using the number of people you entered in line 5, fill 641.00 in the dollar amount listed for your county for insurance and operating expenses. Housing and utilities - Mortgage or rent expenses: 9a. Using the number of people you entered in line 5, fill in the dollar amount 2,023.00 listed for your county for mortgage or rent expenses. 9b. Total average monthly payment for all mortgages and other debts secured by your home. To calculate the total average monthly payment, add all amounts that are contractually due to each secured creditor in the 60 months after you file for bankruptcy. Next divide by 60. Name of the creditor Average monthly payment Caliber Home Loans, Inc. 201.66 Select Portfolio Servicing Inc 1,660.89 Сору Repeat this amount 1,862.55 9b. Total average monthly payment here=> on line 33a. 9c. Net mortgage or rent expense. Subtract line 9b (total average monthly payment) from line 9a (mortgage Copy 160.45 160.45 or rent expense). If this number is less than \$0, enter \$0. here=> 10. If you claim that the U.S. Trustee Program's division of the IRS Local Standard for housing is incorrect and

Explain why:

affects the calculation of your monthly expenses, fill in any additional amount you claim.

0.00

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Debtor 1	MaryLu O'Donnell		Case n	umber	(if known)		
11.	Local transportation expenses: Check the number of vehic	cles for which you claim	an ow	nersh	ip or operating	g expense.	
	□ 0. Go to line 14.						
	☐ 1. Go to line 12.						
	■ 2 or more. Go to line 12.						
12	Vehicle operation expense: Using the IRS Local Standards	s and the number of veh	nicles fo	r whi	ch vou claim t	ne	
	operating expenses, fill in the Operating Costs that apply for						608.00
13.	<b>Vehicle ownership or lease expense:</b> Using the IRS Local You may not claim the expense if you do not make any loan more than two vehicles.						
Vel	hicle 1 Describe Vehicle 1: 2012 Ford Escape 80k	miles					
13a.	Ownership or leasing costs using IRS Local Standard		9	3	497.00		
13b.	Average monthly payment for all debts secured by Vehicle 1						
	Do not include costs for leased vehicles.						
	To calculate the average monthly payment here and on line are contractually due to each secured creditor in the 60 mon bankruptcy. Then divide by 60.		at				
	Name of each creditor for Vehicle 1	Average monthly payment					
	Ford Motor Credit Corp	\$ 69.11					
	Total Average Monthly Payment	\$69.11	Copy		-\$69	Repeat this amount on line 33b.	
13c	Net Vehicle 1 ownership or lease expense			-		Copy net	
100.	Subtract line 13b from line 13a. if this number is less than \$0	), enter \$0		\$	427.89	Vehicle 1 expense here => \$	427.89
Vel	hicle 2 Describe Vehicle 2:					_	
13d.	Ownership or leasing costs using IRS Local Standard		9	3	0.00		
13e.	Average monthly payment for all debts secured by Vehicle 2 leased vehicles.	. Do not include costs fo	or				
	Name of each creditor for Vehicle 2	Average monthly payment					
	-NONE-	\$					
			Сор	y		Repeat this	
	Total average monthly payment	\$	here	-\$_	0.0	amount on line	
13f.	Net Vehicle 2 ownership or lease expense		Γ			Copy net	
	Subtract line 13e from line 13d. if this number is less than \$0	, enter \$0		\$	0.00	Vehicle 2 expense here => \$	0.00
14.	Public transportation expense: If you claimed 0 vehicles Public Transportation expense allowance regardless of					 n the \$	0.00
15.	Additional public transportation expense: If you claimed also deduct a public transportation expense, you may fill in w not claim more than the IRS Local Standard for <i>Public Trans</i>	hat you believe is the a					0.00

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Debtor 1 MaryLu O'Donnell Case number (if known)

	er Necessary Expenses	In addition to the expense the following IRS category		ns listed above	, you are allowed your monthly expenses	s for	
16.	self-employment taxes, so	cial security taxes, and Mo owever, if you expect to r rom the total monthly amo	edicare taxe receive a tax	s. You may ind refund, you m	d local taxes, such as income taxes, clude the monthly amount withheld from lust divide the expected refund by 12 for taxes.	\$	1,402.00
17.	Involuntary deductions:		deductions t	hat your job re	quires, such as retirement		
	contributions, union dues, a Do not include amounts tha		ır job, such a	as voluntary 40	11(k) contributions or payroll savings.	\$	0.00
18.	filing together, include payr	ments that you make for y or life insurance on your o	our spouse'	s term life insu	e insurance. If two married people are irance. I spouse's life insurance, or for any form	\$	162.00
19.	Court-ordered payments: administrative agency, suc Do not include payments o	h as spousal or child sup <sub>l</sub>	port paymen	its.	by the order of a court or  You will list these obligations in line 35.	\$	0.00
20.	Education: The total mont						
	as a condition for your j	•				•	0.00
		, , ,		•	ation is available for similar services.	\$	0.00
21.	Childcare: The total month Do not include payments for				sitting, daycare, nursery, and preschool.	\$	0.00
22.	that is required for the heal by a health savings account	th and welfare of you or y nt. Include only the amour	our depend nt that is mo	ents and that is re than the tota		\$	0.00
22	Payments for health insura	_			y in line 25.  you pay for telecommunication services	Ψ	
	phone service, to the exter income, if it is not reimburs Do not include payments for	at necessary for your heal ed by your employer. or basic home telephone,	th and welfa	re or that of you	special long distance, or business cell our dependents or for the production of rvice. Do not include self-employment ount you previously deducted.	+\$	0.00
24	Add all of the expenses a	llowed under the IRS ex	xpense allo	wances.		\$	4,707.34
24.	Add lines 6 through 23.						
	Add lines 6 through 23. litional Expense Deduction				ne Means Test. s listed in lines 6-24.		
Add	litional Expense Deduction  Health insurance, disabil	Note: Do not including ity insurance, and healt	de any exper <b>h savings a</b>	nse allowances account exper		or	
Add	litional Expense Deduction  Health insurance, disabil insurance, disability insura	Note: Do not including ity insurance, and healt	de any exper <b>h savings a</b>	nse allowances account exper	s listed in lines 6-24.  ses. The monthly expenses for health	or	
Add	Health insurance, disabil insurance, disabil insurance, disability insura your dependents.	Note: Do not including ity insurance, and healt	de any exper h savings a accounts tha	nse allowances ccount exper t are reasonab	s listed in lines 6-24.  ses. The monthly expenses for health	or	
Add	Health insurance, disabil insurance, disability insurance, your dependents. Health insurance	Note: Do not including ity insurance, and healt	de any expering a saccounts tha	nse allowances ccount exper t are reasonab	s listed in lines 6-24.  ses. The monthly expenses for health	or	
Add	Health insurance, disabil insurance, disability insurance your dependents. Health insurance Disability insurance	Note: Do not including ity insurance, and healt	th savings a accounts that	ccount expert are reasonab  205.64  37.59	s listed in lines 6-24.  ses. The monthly expenses for health	or \$	243.23
Add	Health insurance, disabil insurance, disability insurance, disability insurance your dependents. Health insurance Disability insurance Health savings account	Note: Do not including ity insurance, and healt note, and health savings a total amount?	de any experiments and execution that the savings are accounts that the same shows that the savings are savings and the savings are saving	ccount exper t are reasonab  205.64  37.59  0.00	s listed in lines 6-24.  Ises. The monthly expenses for health ly necessary for yourself, your spouse, o		243.23
Add	Health insurance, disabil insurance, disabil insurance, disability insura your dependents. Health insurance Disability insurance Health savings account Total  Do you actually spend this	Note: Do not including ity insurance, and healt note, and health savings a total amount?	de any experiments and execution that the savings are accounts that the same shows that the savings are savings and the savings are saving	ccount exper t are reasonab  205.64  37.59  0.00	s listed in lines 6-24.  Ises. The monthly expenses for health ly necessary for yourself, your spouse, o		243.23
<b>Add</b> 25.	Health insurance, disabilinsurance, disabilinsurance, disability insurance your dependents.  Health insurance Disability insurance Health savings account  Total  Do you actually spend this  No. How much do your yes  Continued contributions continue to pay for the reas	Note: Do not including ity insurance, and healt note, and health savings a total amount?  You actually spend?  To the care of househol sonable and necessary care of your immediate family	the any expension of the savings as accounts that the same series of the savings are and support who is unally	ccount exper t are reasonab  205.64  37.59  0.00  243.23  members. The port of an elder ble to pay for s	c actual monthly expenses that you will rly, chronically ill, or disabled member of such expenses. These expenses may		243.23
25.	Health insurance, disabil insurance, disabilinsurance, disability insurance your dependents. Health insurance Disability insurance Health savings account  Total  Do you actually spend this No. How much do your yes  Continued contributions continue to pay for the reasyour household or member include contributions to an  Protection against family	Note: Do not including ity insurance, and healt note, and health savings a total amount?  You actually spend?  to the care of househol conable and necessary care of your immediate family account of a qualified AB violence. The reasonab	the any expension of the savings at accounts that accounts the saving account	members. The port of an elder ble to pay for so worthly exper	c actual monthly expenses that you will rly, chronically ill, or disabled member of such expenses. These expenses may	\$\$	

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btor 1	MaryLu O'Donnell	Case number (if kno	wn)			
	Additional home energy costs. Your homine 8.	e energy costs are included in your insurance and operati	ng expens	es on		
	If you believe that you have home energy on the fill in the excess amount of home er	osts that are more than the home energy costs included in ergy costs	n expenses	on line		
	You must give your case trustee document amount claimed is reasonable and necessa	ation of your actual expenses, and you must show that the ry.	additional		\$	0.00
;		ren who are younger than 18. The monthly expenses (n pendent children who are younger than 18 years old to att				
	You must give your case trustee document claimed is reasonable and necessary and r	ation of your actual expenses, and you must explain why to already accounted for in lines 6-23.	he amount			
,	* Subject to adjustment on 4/01/19, and ev	ry 3 years after that for cases begun on or after the date of	of adjustme	ent.	\$	0.00
I		ne monthly amount by which your actual food and clothing allowances in the IRS National Standards. That amount of the IRS National Standards.				
		onal allowance, go online using the link specified in the se obe available at the bankruptcy clerk's office.	eparate			
•	You must show that the additional amount	laimed is reasonable and necessary.			\$_	39.00
	Continuing charitable contributions. The instruments to a religious or charitable orga	amount that you will continue to contribute in the form of nization. 11 U.S.C. § 548(d)(3) and (4).	cash or fina	ancial		
ı	Do not include any amount more than 15%	of your gross monthly income.			\$	80.00
	Add all of the additional expense deduct Add lines 25 through 31.	ions.			\$	362.23
Dedu	ctions for Debt Payment					
	or debts that are secured by an interest bans, and other secured debt, fill in lines	n property that you own, including home mortgages, 33a through 33e.	vehicle			
	o calculate the total average monthly paym reditor in the 60 months after you file for ba	ent, add all amounts that are contractually due to each sen kruptcy. Then divide by 60.	cured			
	Mortgages on your home				Average payme	e monthly
33a.	Copy line 9b here			=>	\$	1,862.55
	Loans on your first two vehicles				· —	.,002.00
33b.	O a mar l'a a 40h h a ma			=>	\$	69.11
3c.				=>	\$ \$	0.00
					Ψ	0.00
33d. Name	List other secured debts: e of each creditor for other secured debt	i	Does paym include tax or insuranc	es		
			□ No			
	-NONE-		□ Yes		\$	
			□ No			
			□ Yes		\$	
			_		Ψ	
			□ No			
			□ Yes	+	\$	
33e	Total average monthly payment. Add lines	33a through 33d\$1	,931.66	Copy total here=	\$_	1,931.66

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Debtor 1 MaryLu O'Donnell			case n	umber (if known)		
	n line 33 secured by your prima or your support or the support		cle,			
☐ No. Go to line 35.						
listed in line 33, to kee	you must pay to a creditor, in adep possession of your property (call fill in the information below.					
Name of the creditor	Identify property that secur	es the debt	To	otal cure amount	Monthl amoun	
Caliber Home Loans, Inc.	18 Dartmouth Rd Old Parlin, NJ 08859 Mid	• .	\$	212.00		3.53
Ford Motor Credit Corp	2012 Ford Escape 80		\$	230.00	÷ 60 = \$	3.83
Select Portfolio Servicing Inc	18 Dartmouth Rd Old Parlin, NJ 08859 Mid		\$_	5,000.00	÷ 60 = \$	83.33
		Tota	al \$	90.69	Copy total here=> \$_	90.69
35. Do you owe any priority claim are past due as of the filing da	s - such as a priority tax, child te of your bankruptcy case? 1		that			
■ No. Go to line 36.						
_ 110. GG 10 III10 GG.	of all of these priority claims. Do	not include current or				
	s, such as those you listed in line					
0 0,	ast-due priority claims		\$	0.00	÷60 \$	0.00
36. Projected monthly Chapter 13	plan payment		\$	200.00		
Office of the United States Courthe Executive Office for United S To find a list of district multipliers that	t as stated on the list issued by the sign of the sign	orth Carolina) or by cts). g the link specified in the	X	10.00		
Average monthly administrative	expense			\$20.00	Copy total here=> \$	20.00
37. Add all of the deductions for Add lines 33e through 36.	debt payment.				\$	2,042.35
<b>Total Deductions from Income</b>						
38. Add all of the allowed deducti	ons.					
Copy line 24, All of the expense expense allowances	es allowed under IRS	\$\$	34			
Copy line 32, All of the addition	al expense deductions	\$ 362.2	23			
Copy line 37, All of the deduction	ons for debt payment	+\$ 2,042.3	35	_		
Total deductions		\$ 7,111.9	92	Copy total here=>	\$	7,111.92

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or 1	MaryLu C	)'Don	nell			Case	num	ber (if known)			
2:	Determin	ne You	ır Disposable Income Under 1	11 U.S.C. § 132	25(b	)(2)					
			rent monthly income from line						\$	7,75	4.22
<b>ch</b> i dis rec	Idren. The ability paymerived in accordance.	month ents fo cordan	ly necessary income you recome you recome you recome you apport or a dependent child, reported ince with applicable nonbankrupt anded for such child.	payments, fost n Part I of Form	er c 12	are payments, or 2C-1, that you	\$	736	.00		
em in 1	ployer withh	neld fro 541(b)	etirement deductions. The moon wages as contributions for q (7) plus all required repayments. § 362(b)(19).	ualified retirem	ent	plans, as specified	\$	760	.50		
2. <b>To</b> 1	al of all de	ductio	ns allowed under 11 U.S.C. §	707(b)(2)(A).	Cop	y line 38 here =>	\$	7,111	.92		
exp the	enses and ir expenses	you ha . You i	ial circumstances. If special ci ave no reasonable alternative, c must give your case trustee a d ocumentation for the expenses.	lescribe the sp etailed explana	ecia	I circumstances and					
escri	be the spe	cial ci	rcumstances			Amount of expen	ıse				
					_	\$		-			
						\$		-			
						\$	1	-			
				Total	\$_	0.00	Co	re=> \$ 	0	0.00	
l. To	tal adjustm	ents.	Add lines 40 through 43.			=> \$		8,608.42	Copy here:		8.42
			thly disposable income unde	r § 1325(b)(2).	Sub	otract line 44 from lin	ne 3	9.	\$	\$	20
hav tim you	ange in inc ve changed e your case ı filed your p	ome of or are will be betition	or expenses. If the income in F virtually certain to change after e open, fill in the information belon, check 122C-1 in the first coluin when the increase occurred,	the date you f ow. For examp mn, enter line 2	iled ble, i 2 in 1	your bankruptcy peti f the wages reported the second column, o	ition d inc	and during the creased after			
rm	Line		Reason for change			Date of change		Increase or decrease?	Am	ount of change	
] 1220 ] 1220						_	_	☐ Increase ☐ Decrease ☐ Increase ☐ Decrease	\$ .		

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Debtor 1	MaryLu O'Donnell	Case number (if known)
Part 4:	Sign Below	
	By signing here, under penalty of perjury you declare that the	ne information on this statement and in any attachments is true and correct.
х	/s/ MaryLu O'Donnell MaryLu O'Donnell Signature of Debtor 1	
Date	11/27/2018 MM / DD / YYYY	

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Debtor 1 MaryLu O'Donnell Case number (if known)

#### **Current Monthly Income Details for the Debtor**

#### **Debtor Income Details:**

Income for the Period 06/01/2018 to 11/30/2018.

Line 2 - Gross wages, salary, tips, bonuses, overtime, commissions

Source of Income: **Citi** Year-to-Date Income:

Starting Year-to-Date Income: **\$41,698.46** from check dated **5/25/2018**. Ending Year-to-Date Income: **\$83,807.80** from check dated **11/30/2018**.

Income for six-month period (Ending-Starting): \$42,109.34 .

Average Monthly Income: \$7,018.22 .

Line 4 & 40 - Child support income (including foster care and disability)

Source of Income: **child support** Constant income of **\$736.00** per month.

# Notice Required by 11 U.S.C. § 342(b) for Individuals Filing for Bankruptcy (Form 2010)

#### This notice is for you if:

You are an individual filing for bankruptcy, and

Your debts are primarily consumer debts. Consumer debts are defined in 11 U.S.C. § 101(8) as "incurred by an individual primarily for a personal, family, or household purpose."

### The types of bankruptcy that are available to individuals

Individuals who meet the qualifications may file under one of four different chapters of Bankruptcy Code:

Chapter 7 - Liquidation

Chapter 11 - Reorganization

Chapter 12 - Voluntary repayment plan for family farmers or fishermen

Chapter 13 - Voluntary repayment plan for individuals with regular income

You should have an attorney review your decision to file for bankruptcy and the choice of chapter.

Chapte	er 7:	Liquidation	
	\$245	filing fee	
	\$75	administrative fee	
<u>+</u>	\$15	trustee surcharge	
	\$335	total fee	

Chapter 7 is for individuals who have financial difficulty preventing them from paying their debts and who are willing to allow their nonexempt property to be used to pay their creditors. The primary purpose of filing under chapter 7 is to have your debts discharged. The bankruptcy discharge relieves you after bankruptcy from having to pay many of your pre-bankruptcy debts. Exceptions exist for particular debts, and liens on property may still be enforced after discharge. For example, a creditor may have the right to foreclose a home mortgage or repossess an automobile.

However, if the court finds that you have committed certain kinds of improper conduct described in the Bankruptcy Code, the court may deny your discharge.

You should know that even if you file chapter 7 and you receive a discharge, some debts are not discharged under the law. Therefore, you may still be responsible to pay:

most taxes;

most student loans;

domestic support and property settlement obligations;

most fines, penalties, forfeitures, and criminal restitution obligations; and

certain debts that are not listed in your bankruptcy papers.

You may also be required to pay debts arising from:

fraud or theft:

fraud or defalcation while acting in breach of fiduciary capacity;

intentional injuries that you inflicted; and

death or personal injury caused by operating a motor vehicle, vessel, or aircraft while intoxicated from alcohol or drugs.

If your debts are primarily consumer debts, the court can dismiss your chapter 7 case if it finds that you have enough income to repay creditors a certain amount. You must file *Chapter 7 Statement of Your Current Monthly Income* (Official Form 122A–1) if you are an individual filing for bankruptcy under chapter 7. This form will determine your current monthly income and compare whether your income is more than the median income that applies in your state.

If your income is not above the median for your state, you will not have to complete the other chapter 7 form, the *Chapter 7 Means Test Calculation* (Official Form 122A–2).

If your income is above the median for your state, you must file a second form —the *Chapter 7 Means Test Calculation* (Official Form 122A–2). The calculations on the form— sometimes called the *Means Test*—deduct from your income living expenses and payments on certain debts to determine any amount available to pay unsecured creditors. If

your income is more than the median income for your state of residence and family size, depending on the results of the *Means Test*, the U.S. trustee, bankruptcy administrator, or creditors can file a motion to dismiss your case under § 707(b) of the Bankruptcy Code. If a motion is filed, the court will decide if your case should be dismissed. To avoid dismissal, you may choose to proceed under another chapter of the Bankruptcy Code.

If you are an individual filing for chapter 7 bankruptcy, the trustee may sell your property to pay your debts, subject to your right to exempt the property or a portion of the proceeds from the sale of the property. The property, and the proceeds from property that your bankruptcy trustee sells or liquidates that you are entitled to, is called *exempt property*. Exemptions may enable you to keep your home, a car, clothing, and household items or to receive some of the proceeds if the property is sold.

Exemptions are not automatic. To exempt property, you must list it on *Schedule C: The Property You Claim as Exempt* (Official Form 106C). If you do not list the property, the trustee may sell it and pay all of the proceeds to your creditors.

#### **Chapter 11: Reorganization**

\$1,167 filing fee

\$550 administrative fee \$1,717 total fee

Chapter 11 is often used for reorganizing a business, but is also available to individuals. The provisions of chapter 11 are too complicated to summarize briefly.

#### **Read These Important Warnings**

Because bankruptcy can have serious long-term financial and legal consequences, including loss of your property, you should hire an attorney and carefully consider all of your options before you file. Only an attorney can give you legal advice about what can happen as a result of filing for bankruptcy and what your options are. If you do file for bankruptcy, an attorney can help you fill out the forms properly and protect you, your family, your home, and your possessions.

Although the law allows you to represent yourself in bankruptcy court, you should understand that many people find it difficult to represent themselves successfully. The rules are technical, and a mistake or inaction may harm you. If you file without an attorney, you are still responsible for knowing and following all of the legal requirements.

You should not file for bankruptcy if you are not eligible to file or if you do not intend to file the necessary documents.

Bankruptcy fraud is a serious crime; you could be fined and imprisoned if you commit fraud in your bankruptcy case. Making a false statement, concealing property, or obtaining money or property by fraud in connection with a bankruptcy case can result in fines up to \$250,000, or imprisonment for up to 20 years, or both. 18 U.S.C. §§ 152, 1341, 1519, and 3571.

### Chapter 12: Repayment plan for family farmers or fishermen

	\$200	filing fee
+	\$75	administrative fee
	\$275	total fee

Similar to chapter 13, chapter 12 permits family farmers and fishermen to repay their debts over a period of time using future earnings and to discharge some debts that are not paid.

# Chapter 13: Repayment plan for individuals with regular income

	\$235	filing fee
+	\$75	administrative fee
	\$310	total fee

Chapter 13 is for individuals who have regular income and would like to pay all or part of their debts in installments over a period of time and to discharge some debts that are not paid. You are eligible for chapter 13 only if your debts are not more than certain dollar amounts set forth in 11 U.S.C. § 109.

Under chapter 13, you must file with the court a plan to repay your creditors all or part of the money that you owe them, usually using your future earnings. If the court approves your plan, the court will allow you to repay your debts, as adjusted by the plan, within 3 years or 5 years, depending on your income and other factors.

After you make all the payments under your plan, many of your debts are discharged. The debts that are not discharged and that you may still be responsible to pay include:

domestic support obligations,

most student loans,

certain taxes,

debts for fraud or theft,

debts for fraud or defalcation while acting in a fiduciary capacity,

most criminal fines and restitution obligations,

certain debts that are not listed in your bankruptcy papers,

certain debts for acts that caused death or personal injury, and

certain long-term secured debts.

#### Warning: File Your Forms on Time

Section 521(a)(1) of the Bankruptcy Code requires that you promptly file detailed information about your creditors, assets, liabilities, income, expenses and general financial condition. The court may dismiss your bankruptcy case if you do not file this information within the deadlines set by the Bankruptcy Code, the Bankruptcy Rules, and the local rules of the court.

For more information about the documents and their deadlines, go to: <a href="http://www.uscourts.gov/bkforms/bankruptcy\_forms.html">http://www.uscourts.gov/bkforms/bankruptcy\_forms.html</a>

#### Bankruptcy crimes have serious consequences

If you knowingly and fraudulently conceal assets or make a false oath or statement under penalty of perjury—either orally or in writing—in connection with a bankruptcy case, you may be fined, imprisoned, or both.

All information you supply in connection with a bankruptcy case is subject to examination by the Attorney General acting through the Office of the U.S. Trustee, the Office of the U.S. Attorney, and other offices and employees of the U.S. Department of Justice.

#### Make sure the court has your mailing address

The bankruptcy court sends notices to the mailing address you list on *Voluntary Petition for Individuals Filing for Bankruptcy* (Official Form 101). To ensure that you receive information about your case, Bankruptcy Rule 4002 requires that you notify the court of any changes in your address.

A married couple may file a bankruptcy case together—called a *joint case*. If you file a joint case and each spouse lists the same mailing address on the bankruptcy petition, the bankruptcy court generally will mail you and your spouse one copy of each notice, unless you file a statement with the court asking that each spouse receive separate copies.

### Understand which services you could receive from credit counseling agencies

The law generally requires that you receive a credit counseling briefing from an approved credit counseling agency. 11 U.S.C. § 109(h). If you are filing a joint case, both spouses must receive the briefing. With limited exceptions, you must receive it within the 180 days *before* you file your bankruptcy petition. This briefing is usually conducted by telephone or on the Internet.

In addition, after filing a bankruptcy case, you generally must complete a financial management instructional course before you can receive a discharge. If you are filing a joint case, both spouses must complete the course.

You can obtain the list of agencies approved to provide both the briefing and the instructional course from: <a href="http://justice.gov/ust/eo/hapcpa/ccde/cc\_approved.html">http://justice.gov/ust/eo/hapcpa/ccde/cc\_approved.html</a>

In Alabama and North Carolina, go to: http://www.uscourts.gov/FederalCourts/Bankruptcy/ BankruptcyResources/ApprovedCredit AndDebtCounselors.aspx.

If you do not have access to a computer, the clerk of the bankruptcy court may be able to help you obtain the list.

Document Page 64 of 71 UNITED STATES BANKRUPTCY COURT DISTRICT OF NEW JERSEY Caption in Compliance with D.N.J. LBR 9004-1(b) Warren Brumel, Esq. WB3626 65 Main Street PO Box 181 Keyport, NJ 07735 732-264-3400 wbrumel@keyportlaw.com In Re: Case No.: MaryLu O'Donnell 13 Chapter: Judge: DISCLOSURE OF CHAPTER 13 DEBTOR'S ATTORNEY COMPENSATION 1. Pursuant to 11 U.S.C. § 329(a) and Fed. R. Bankr. P. 2016(b), I certify that I am the attorney for the debtor(s) and that compensation was paid to me within one year before the filed date of the petition, or agreed to be paid to me, for services rendered or to be rendered on behalf of the debtor(s) in connection with this bankruptcy case is as follows: ■ Under D.N.J. LBR 2016-5(b), I have agreed to accept for all legal services required to confirm a plan, subject to the exclusions listed below, including administrative services that may occur postconfirmation, a flat fee in the amount of \$ 4,500.00 . I understand that I must demonstrate that additional services were unforeseeable at the time of the filing of this disclosure if I seek additional compensation and reimbursement of necessary expenses. Legal services on behalf of the debtor in connection with the following are not included in the flat fee: Representation of the debtor in: • adversary proceedings, loss mitigation/loan modification efforts, post-confirmation filings and matters brought before the Court. I have received: \$ 1,250.00 The balance due is: \$ 3,250.00 The balance  $\blacksquare$  will  $\square$  will not be paid through the plan. □ Under D.N.J. LBR 2016-5(c), I have agreed to accept for legal services provided on behalf of the debtor in this case, an hourly fee of \$ \_\_\_\_. The hourly fee charged by other members of my firm that may provide services to this client range from \$ \_\_\_\_ to \$ \_\_\_\_. I understand that I must receive the Court's approval of any fees or expenses to be paid to me in this case post petition pursuant to D.N.J. LBR 2016-1. I have received: \$ 2. The source of the funds paid to me was: ■ Debtor(s) □ Other (specify below)

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If a balance is due, the source of future compensation to be paid to me is:		
■ Debtor(s)	☐ Other (specify below)	
f I have agreed to share compens	to share compensation with another person(s) unless they are members of my law ation with a person(s) who is not a member of my law firm, a copy of that ng in the compensation is attached.	
11/27/2018	/s/ Warren Brumel, Esq. Warren Brumel, Esq. WB3626	
	■ Debtor(s)  I □ have or ■ have not agreed I have agreed to share compensent and a list of the people share	

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### **United States Bankruptcy Court**District of New Jersey

	District of New Jersey				
In re MaryLu O'Donnell		Case No.			
	Debtor(s)	Chapter	13		
VERIFICATION OF CREDITOR MATRIX					
The above-named Debtor hereby verifies that the attached list of creditors is true and correct to the best of his/her knowledge.					
Date: 11/27/2018	/s/ MaryLu O'Donnell				
	MaryLu O'Donnell				

Signature of Debtor

Amazon/Synchrony Bank Att: Bankruptcy Dept. PO Box 965061 Orlando, FL 32896-5061

Avant LLC 222 N. La Salle Street Suite 1700 Chicago, IL 60601

Bank of America PO Box 982234 El Paso, TX 79998-2234

Best Buy/Citibank PO Box 15298 Wilmington, DE 19850-5298

Bureaus Investment Group Portfolio Att: Frontline Asset Strategies 2700 Snellinig Ave N Ste 250 Saint Paul, MN 55113

Caliber Home Loans, Inc. PO Box 24610 Oklahoma City, OK 73124-0610

Capital One Bankruptcy Department PO Box 30285 Salt Lake City, UT 84130-0285

Capital One Att: Bankruptcy Unit Box 85167 Richmond, VA 23285-5167

Care Credit/Synchrony Bank Attn: Bankruptcy Dept PO Box 965064 Orlando, FL 32896-5064 Chase PO Box 15298 Att: Bankruptcy Dept Wilmington, DE 19850-5298

Citibank P.O. Box 6500 Sioux Falls, SD 57117

CKS Financial PO Box 2856 Chesapeake, VA 23327-2856

CKS Prime Investments Att: Financial Resp Debt Collection PO Box 2856 Chesapeake, VA 23327-2856

Credit One Bank PO Box 98873 Las Vegas, NV 89193

D&A Services 1400 E. Touhy Avenue Suite G2 Des Plaines, IL 60018

Dell Financial Services Att: Bankruptcy Dept. PO Box 81577 Austin, TX 78708-1577

Ford Motor Credit Corp Natl Bkcy Svc Cntr Box 537901 Livonia, MI 48153-7901

Frontline Asset Strategies 2700 Snelling Ave N Ste 250 Saint Paul, MN 55113

Garden State Healthcare Associates PO Box 20502 Newark, NJ 07101-5502 Genesis Bankcard Services PO Box 4477 Beaverton, OR 97076-4477

Home Depot/Citibank PO Box 790328 Saint Louis, MO 63179

JCPenney/Synchrony Bank Att: Bankruptcy Department PO Box 965060 Orlando, FL 32896-5060

Kohl's PO Box 3043 Milwaukee, WI 53201-3043

Lord & Taylor Att: Bankruptcy Department PO Box 103104 Roswell, GA 30076

Lyons Doughty & Veldhuis Box 1269 Mt Laurel, NJ 08054

Lyons, Doughty & Veldhuis PC PO Box 1269
Mount Laurel, NJ 08054

Macy's Att: Bankruptcy Dept. PO Box 8053 Mason, OH 45040

Mullooly, Jeffrey, Rooney & Flynn PO Box 9036 Syosset, NY 11791-9036

Old Navy Att: Bankruptcy Dept PO Box 103104 Roswell, GA 30076 PayPal Credit PO Box 5138 Timonium, MD 21094

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Raymour & Flanagan PO Box 130 Liverpool, NY 13088

Select Portfolio Servicing Inc PO Box 65250 Salt Lake City, UT 84165-0250

Selip & Stylianou LLP PO Box 914 Paramus, NJ 07653

Simons Agency 4963 Wintersweet Drive Liverpool, NY 13088

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The Lending Club 71 Stevenson Avenue Suite 300 San Francisco, CA 94105

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Triumvirate Medical Group 168 Franklin Corner Road B 1, Suite 2A Lawrence Township, NJ 08648-2529

Walmart/Sychrony Bank PO Box 965024 Orlando, FL 32896

Wayfair-Comenity Bank PO Box 182789 Columbus, OH 43218